

Occupational Safety & Health Administration Nationally Recognized Testing Laboratory Program

Nationally Recognized Testing Laboratory (NRTL)
Draft Program Directive Extract

US Department of Labor
Occupational Safety and Health Administration
Directorate of Technical Support

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Introduction

OSHA is publishing this draft policy for the purpose of seeking public comment on a possible direction the Agency might take in revising its NRTL Program Directive. It is intended for informational purposes only, and represents only a portion of the potential changes OSHA may make to the directive. At present, this document does not represent OSHA policy, and current NRTLs and organizations applying to become NRTLs should not use this draft policy as a basis to demonstrate compliance with 29 CFR 1910.7. If OSHA ultimately decides to adopt this draft policy, NRTLs and applicants would be able use Appendices A and B of this document to demonstrate compliance with 29 CFR 1910.7. Appendices A and B should be read in conjunction with, and would augment, ISO/IEC 17025:2005 and ISO/IEC 17065:2012, respectively.

Where the term “requirement” is used throughout this policy, ISO/IEC 17025:2005 and ISO/IEC 17065:2012, it would be interpreted to represent the minimum level of performance to demonstrate compliance with 29 CFR 1910.7 if OSHA ultimately decides to adopt this draft policy.

1. General information

This text is under development, but OSHA currently believes that this section would contain general information about the NRTL Program, definitions, and OSHA’s policies on complaints and confidentiality.

2. Eligibility and Requirements for Recognition

This text is under development, but OSHA currently believes that this section would contain information about an applicant’s eligibility and an NRTL’s scope of recognition.

3. Recognition Process

This text is under development, but OSHA currently believes that this section would describe the process that the Agency would use to review and process applications (initial, expansion and renewal), policies on documentation applicants might produce to show compliance with 29 CFR 1910.7, and information on fees. This section would also describe on-site assessments of NRTLs and applicants by OSHA, and policies for responding to deficiencies, and for the corrective actions OSHA may take if an NRTL fails to address noted deficiencies.

Appendix A - Laboratory Requirements

4 Management requirements

To meet this policy, a laboratory shall comply with all of Section 4 of ISO/IEC 17025:2005 and the additional management policies provided below:

4.1 Organization

- A. The management system shall cover work conducted at recognized sites.
- B. If any services, such as consulting, design, or research, are offered by the laboratory, it shall have a policy and procedure for maintaining impartiality through separation of those services from its testing activities.

4.2 Management system

There are no management policies supplementing Section 4.2 of ISO/IEC 17025:2005.

4.3 Document control

There are no management policies supplementing Section 4.3 of ISO/IEC 17025: 2005.

4.4 Review of requests, tenders and contracts

There are no management policies supplementing Section 4.4 of ISO/IEC 17025: 2005.

4.5 Subcontracting of tests and calibrations

- A. If a laboratory accepts test data and witnessing of testing from other testing organizations, the laboratory shall ensure that:
 - i. each test package has been reviewed and completed for the test standard, following documented procedures;
 - ii. documented procedures are in place to ensure that all test data originates with the testing organization;
 - iii. technical personnel from the laboratory are used for witness testing (see section 5.2 of ISO 17025:2005 and section 5.2 of this document for policies regarding qualifications and competence of technical personnel);
 - iv. documented procedures are in place to ensure the testing organization is accredited to ISO/IEC 17025:2005 for the appropriate scope of testing, or qualified to Section 5 of ISO/IEC 17025:2005 using the laboratory's own qualification program; and

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- v. the continued qualification of the testing organization for its scope of testing is verified on at least an annual basis, and when the testing organization is expanding or modifying its approved scope of testing.
- B. If a laboratory does not accept test data and witnessing of testing from other testing organizations, the laboratory's procedures shall state this.

4.6 Purchasing services and supplies

- A. Except as allowed in Sections 4.6.B and 4.6.C, below, the laboratory shall use a calibration laboratory accredited for the appropriate measurement calibration of its test equipment, even if this calibration laboratory is internal to the laboratory.
- C. If no local or regional calibration laboratory is accredited for any particular type of testing equipment, the laboratory may use the equipment manufacturer, or use an unaccredited calibration laboratory, provided the calibration laboratory is qualified by the laboratory using the laboratory's documented procedures.
- D. The laboratory's internal calibration laboratory does not need to be accredited to perform calibrations, if it only calibrates internally equipment not used for quantitative measurements (e.g., accessibility probes, impact spheres, rulers/measures, and containers used to measure or hold liquids), and whose physical properties are unlikely to change, or equipment whose measurement parameters meet any of the following requirements:
- i. mass above 0.5kg and where an accuracy of + 2% or greater is required; or
 - ii. linear dimensions not less than 0.5mm and where an accuracy of + 0.1mm or greater is required; or
 - iii. time for periods of 60 seconds or more, unless the test standard requires a specific accuracy of measurement.
- E. However, such equipment shall be initially calibrated by an accredited calibration laboratory, or if none, by the manufacturer or a qualified calibration laboratory, before being placed into service.
- F. The laboratory shall use documented procedures to calibrate equipment internally, or to verify any type of equipment that does not need to be calibrated.

4.7 Service to the customer

There are no management polices supplementing Section 4.7 of ISO/IEC 17025: 2005.

4.8 Complaints

There are no management polices supplementing Section 4.8 of ISO/IEC 17025: 2005.

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4.9 Control of nonconforming testing and/or calibration work

There are no management polices supplementing Section 4.9 of ISO/IEC 17025: 2005.

4.10 Improvement

There are no management polices supplementing Section 4.10 of ISO/IEC 17025: 2005.

4.11 Corrective action

There are no management polices supplementing Section 4.11 of ISO/IEC 17025: 2005.

4.12 Preventive action

There are no management polices supplementing Section 4.12 of ISO/IEC 17025: 2005.

4.13 Control of records

There are no management polices supplementing Section 4.13 of ISO/IEC 17025: 2005.

4.14 Internal audits

There are no management polices supplementing Section 4.14 of ISO/IEC 17025: 2005.

4.15 Management reviews

There are no management polices supplementing Section 4.15 of ISO/IEC 17025: 2005.

5 Technical requirements

To meet this policy, a laboratory shall comply with all of Section 5 of ISO/IEC 17025:2005 and the additional technical policies provided below:

5.1 General

There are no technical polices supplementing Section 5.1 of ISO/IEC 17025: 2005.

5.2 Personnel

A. The laboratory shall maintain competent technical personnel that are:

- i. Permanent employees or employees contracted by the laboratory;
- ii. knowledgeable in appropriate evaluation, test procedures, and test standards for the types of products covered by the NRTL's scope of recognition; and

- iii. knowledgeable in the risks and hazards associated with conducting safety testing, including laboratory safety regulations, safeguards and procedures to reduce laboratory risks.
 - iv. Laboratory management shall be knowledgeable in OSHA's NRTL Program regulations, 29 CFR 1910.7, the criteria set out in ISO/IEC 17025:2005 and the OSHA-specific testing policies contained in this document. A list of laboratory management shall be maintained.
- B. A training program for new and current technical personnel shall be documented. Training shall include applying new/updated test procedures and performing required tests. Current technical personnel shall receive additional training, if necessary, when test standards or procedures are updated or developed, or when responsibilities have changed. All training shall be conducted through appropriate training mechanisms, such as on-the-job training or formal classroom training.
- C. Records shall document competence in the particular testing, inspection, or other technical subjects, procedures, or practices that technical personnel will perform. For example, a record may include past project work in testing, education, and/or formal training in testing, appropriate test standards, and relevant test procedures.

5.3 Accommodation and environmental conditions

There are no technical polices supplementing Section 5.3 of ISO/IEC 17025: 2005.

5.4 Test and calibration methods and method validation

- A. Each test procedure shall adequately address all of the applicable requirements for the types of products or components to be tested to a particular standard. The test procedure shall include or specify, as appropriate, the:
- i. title;
 - ii. effective date;
 - iii. specific test equipment to use along with their required ratings;
 - iv. minimum accuracy requirements;
 - v. warnings/caution statements to alert the operators of potential hazards;
 - vi. normal and any unusual ambient conditions (including tolerances) for tests;
 - vii. test data to be obtained and recorded;

- viii. the minimum resolution of measurements;
 - ix. objective acceptance criteria for results;
 - x. testing techniques; and
 - xi. test operator instructions on equipment operation and on handling and preparation of test samples (including instructions on multiple sample marking, if applicable).
- B. Documented procedures shall be in place and provide written and complete instructions for performing the review for the construction requirements of the standard when this review involves more than a visual pass/fail determination.
- C. Procedures shall specify all aspects of developing, reviewing and maintaining tests or other technical methods and procedures (including related data collection methods, forms, and checklists), and include steps for:
- i. identifying the personnel responsible for developing, reviewing, and maintaining these documents;
 - ii. specifying the frequency of review by technical personnel and management;
 - iii. ensuring consistency with applicable test standard(s); and
 - iv. ensuring test modifications are reviewed by personnel who are familiar with the applicable test standard(s).

5.5 Equipment

- A. All equipment used for testing and evaluating products shall be available and in proper working order for NRTL work in the laboratory. Equipment needed only occasionally for a special or unique type of product that is seldom tested, may be rented, as needed.
- B. The laboratory must own, lease, or rent its equipment, and shall have documented procedures requiring that new, leased, rented, and repaired equipment is calibrated prior to first use.
- C. Procedures shall address adding, deleting, modifying, or maintaining information in equipment records in an accurate and timely manner, and specify the personnel responsible for these tasks.
- D. Procedures shall specify the steps for establishing calibration intervals for each type or item of equipment, and specify criteria, steps, and approvals for extending the calibration interval of an instrument.

- E. The laboratory shall have documented procedures to examine the effects of defective equipment on calibrations and tests. The procedures shall identify the responsible personnel, specify their responsibilities, and provide the steps for the examination, including:
- i. determining whether the effects are unacceptable (including the accept/reject criteria);
 - ii. identifying the products affected;
 - iii. analyzing the particular tests impacted for these products; and
 - iv. determining whether retesting is required.

Procedures shall also specify the report or document that is prepared for this examination, the notification provided to clients when retesting is required, and the steps to follow to perform the retesting.

- F. If a piece of test equipment is found to be out-of-tolerance, the laboratory shall have procedures to:
- i. identify and document any product(s) tested by the out-of-tolerance equipment after the last known date the equipment was in-tolerance;
 - ii. review and document any testing conducted using the out-of-tolerance equipment to determine if the out-of-tolerance condition impacted test results;
 - iii. retest the products impacted by the out-of-tolerance condition, and document the results; and
 - iv. document the corrective actions taken to comply with Section 5.5.F.i, ii, and iii, above, and any corrective actions taken, and retain such documentation in the test equipment records and the technical files or test records for any tested products impacted by the out-of-tolerance condition.

5.6 Measurement traceability

There are no technical polices supplementing Section 5.6 of ISO/IEC 17025.

5.7 Sampling

There are no technical polices supplementing Section 5.7 of ISO/IEC 17025.

5.8 Handling of test and calibration items

There are no technical polices supplementing Section 5.8 of ISO/IEC 17025.

5.9 Assuring the quality of test and calibration results

There are no technical polices supplementing Section 5.9 of ISO/IEC 17025.

5.10 Reporting the results

A. The laboratory shall have procedures to record the following for each test conducted:

- i. test procedure(s) and standard(s) used;
- ii. product or component(s) tested;
- iii. test equipment used for testing, measurement, or review (including the equipment's ratings and accuracies, unless otherwise readily available);
- iv. date of the test;
- v. test report number;
- vi. signature of the personnel performing the test(s);
- vii. the test conditions as specified by the test standard, e.g., required voltage, power, temperature, or humidity for the test;
- viii. test or inspection results; and
- ix. all of the applicable data required by the laboratory's procedures.

Appendix B - Certification Body Requirements

4 General requirements

To meet this policy, a certification body must comply with all of Section 4 of ISO/IEC 17065:2012 and the additional general policies provided below:

4.1 Legal and contractual policies

- A. Registration of a certification mark with the U.S. Patent and Trademark Office (USPTO) shall be maintained. USPTO records shall show the following:
- i. USPTO records shall show the mark registered as a product certification mark; and
 - ii. USPTO records shall show that:
 - (a) the NRTL owns the certification mark; or
 - (b) another NRTL owns the certification mark (provided OSHA has accepted a formal agreement between the NRTLs controlling the use of the mark); or
 - (c) the certification mark is owned by an entity that the NRTL wholly owns (provided OSHA has evidence that only the NRTL has exclusive use of the mark).
- Note. An organization applying to become a NRTL shall provide evidence with its NRTL application of having submitted an application for registration with the USPTO. An applicant must provide evidence of registration of the certification mark prior to OSHA recognizing the organization as a NRTL.
- B. NRTL documented procedures shall ensure that the organization's mark is applied to each unit of the product certified, or, if not feasible, to the smallest package. The standard(s), certification category, or a symbol or code that identifies the standard(s) to which the unit is certified shall be shown in the marking.
- C. Procedures and resources shall be in place to control the use of the certification mark when the product is initially certified as well as in cases when the manufacturer proposes to modify the certified product, and to monitor advertisements, catalogues, and brochures for incorrect references or misleading use of its certification mark.
- D. Documented procedures shall ensure that corrective actions are taken for incorrect references or misleading use of the certification mark.

4.2 Management of impartiality

- A. Policies and procedures shall ensure that the certification body: (i) documents how the certification body identifies any risks to its impartiality on an ongoing basis, including how it determines if an activity or relationship presents or does not present a risk to its impartiality; (ii) identifies and describes each such risk; and (iii) describes how the certification body will eliminate or control such risks.

Note. A relationship presenting a risk to impartiality of the certification body may be based on, but is not limited to, the following:

- i. Full or partial ownership of or by a designer, manufacturer, installer, distributor or maintainer of products requiring NRTL approval;
- ii. governance responsibilities with a designer, manufacturer, installer, distributor or maintainer of products requiring NRTL approval;
- iii. current or past employment with a designer, manufacturer, installer, distributor or maintainer of products requiring NRTL approval;
- iv. offering or providing consulting or other types of services related to the design of products requiring NRTL approval;
- v. the certification body or any part of the same legal entity and entities under its organizational control being a designer, manufacturer, installer, distributor or maintainer of products requiring NRTL approval; and
- vi. the certification body or any part of the same legal entity and entities under its organizational control being a trade group or association representing manufacturers or distributors of the certified product or products requiring NRTL approval.

4.3 Liability and financing

There are no general policies supplementing Section 4.3 of ISO/IEC 17065:2012.

4.4 Non-discriminatory conditions

There are no general policies supplementing Section 4.4 of ISO/IEC 17065:2012.

4.5 Confidentiality

There are no general policies supplementing Section 4.5 of ISO/IEC 17065:2012.

4.6 Publicly available information

There are no general policies supplementing Section 4.6 of ISO/IEC 17065:2012.

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5 Structural requirements

To meet this policy, a certification body must comply with all of Section 5 of ISO/IEC 17065:2012.

5.1 Organizational structure and top management

There are no structural policies supplementing Section 5.1 of ISO/IEC 17065:2012.

5.2 Mechanisms for safeguarding impartiality

There are no structural policies supplementing Section 5.2 of ISO/IEC 17065:2012.

6 Resource requirements

To meet this policy, a certification body must comply with all of Section 6 of ISO/IEC 17065:2012 and the additional resource policies provided below:

6.1 Certification body personnel

- A. The certification body shall maintain competent certification personnel that are:
 - i. permanent employees or employees contracted by the certification body;
 - ii. knowledgeable in the evaluation and test processes for standards in the organization's scope of recognition;
 - iii. knowledgeable in the NRTL's certification processes;
 - iv. trained to conduct factory surveillance, as appropriate; and
 - v. not involved in testing of the product to be certified.
- B. Certification body management shall be knowledgeable in the OSHA NRTL Program regulations, 29 CFR 1910.7, the criteria set out in ISO/IEC 17065:2012, and the OSHA-specific NRTL certification policies contained in this document., A list of certification body management shall be maintained.
- C. The certification body's training program for new and current personnel shall be documented. Current personnel shall receive additional training, when certification processes are updated, test standards or procedures are updated or developed, or when responsibilities have changed. All training shall be conducted through appropriate training mechanisms, such as on-the-job training or formal classroom training. Records of training shall be documented in individual training records.

- D. For certification personnel performing evaluation, or review, or making certification decisions, personnel or training records shall document competence in the particular certification functions, procedures, or practices they perform. For example, a record may include past project work in testing or certification, education, and/or formal training in appropriate test standards and relevant procedures.
- E. If persons not employed by the certification body (i.e., contractors) are used to make certification decisions:
- i. the certification body must have a written contract in place with those persons describing their duties, functions and responsibilities;
 - ii. the certification body must ensure that those persons are impartial (see section 4.2);
 - iii. the certification body must ensure those persons are competent, trained and qualified for functions, and must maintain training and qualification records for those persons; and
 - iv. the certification body must conduct periodic training to inform those persons of any new OSHA policies/requirements or certification body requirements.

6.2 Resources for evaluation

When the certification body performs evaluation activities, the organization (recognized or unrecognized site) used for product testing shall meet OSHA NRTL testing requirements.

7 Process requirements

To meet this policy, a certification body must comply with all of Section 7 of ISO/IEC 17065:2012 and the additional process policies provided below:

7.1 General

There are no process policies supplementing Section 7.1 of ISO/IEC 17065:2012.

7.2 Application

- A. Appropriate contracts, covenants, or agreements shall be used in providing certification services to clients, and shall include, but not be limited to, the following:
- i. provision(s) for submitting products for testing;
 - ii. provision(s) for permitting periodic factory surveillance;
 - iii. provision(s) for permitting samples of products to be selected, from production or stock, for independent testing;

- iv. covenants from the client to observe and comply with the applicable test standards;
- v. controls to prevent the client from releasing products resulting from changes (in the product, process or management system) until the certification body has notified the client that the change is acceptable;
- vi. provision(s) for unobstructed access to the manufacturing facilities without prior notification;
- vii. provision(s) that the product will be produced to the same specifications as the sample submitted for initial testing; and
- viii. controls to ensure that all management system and production records will be open and readily available for factory surveillance by the certification body.

B. Procedures or agreements shall be in place to address each of the following situations:

- i. instituting a product recall;
- ii. removing the mark of conformity from products;
- iii. rebuilding a product so it will comply with applicable test standard(s); and
- iv. scrapping or replacing a returned product if it is not practical to remove the mark or rebuild the product.

7.3 Application review

There are no process policies supplementing Section 7.3 of ISO/IEC 17065:2012.

7.4 Evaluation

A. The procedures for evaluating test data or the results of an inspection shall require certification body personnel to:

- i. verify and use the appropriate standard and appropriate edition of the standard;
- ii. provide written justification for how a product complies with each section of the standard (including a reference to a test procedure for sections that require tests be conducted);
- iii. identify the reason for waiving or excluding particular sections of the standard; and
- iv. address components that are not certified or have a non-standard design.

B. Procedures for the evaluation of test data shall identify:

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- i. how to decide which section of a standard applies;
 - ii. how to handle newly developed or unique technologies when the standard does not apply, in part or in whole;
 - iii. how interpretations of the standards are documented and made readily available for personnel; and
 - iv. how failures to the product testing standard are addressed without the certification body engaging in the redesign of the product.
- C. Procedures for acceptance of another NRTL's listing, where an applicant has terminated, or will terminate, certification with another NRTL, shall include procedures for:
- i. identifying the information the applicant must submit for the product(s), including:
 - (a) the other NRTL's full listing report;
 - (b) the other NRTL's factory surveillance reports issued during the most recent 12 months for each manufacturing location;
 - (c) evidence of the resolution of any factory surveillance variances noted in these factory surveillance reports, or if not resolved at the time of application, documentation to enable the certification body to adequately resolve the variance(s); and
 - (d) documentation of any changes to the product that are not addressed in the other NRTL's listing report.
 - ii. the certification body to perform factory surveillance, in compliance with the policies contained in this document, before certifying a product for which no factory surveillance occurred during the most recent 12 months.
 - iii. the certification body to conduct the following activities before certifying the product:
 - (a) reviewing a sample of each product being transferred;
 - (b) performing an inspection; and
 - (c) conducting any product testing to assure the product complies with the critical requirements of the applicable test standard(s).
- D. Prior to issuing a new certification, factory surveillance of the manufacturing facility(s) shall be performed, and a record or report of this factory surveillance shall be prepared that shows the

findings in the areas described in i to iv below. The factory surveillance shall verify the manufacturer maintains:

- i. procedures to control production, including:
 - (a) mechanisms to identify batches or production runs,
 - (b) procedures to isolate non-conforming products,
 - (c) procedures to notify the certification body of changes to the product, production or management systems that may impact a product's compliance,
 - (d) procedures for periodic review and update of master specifications,
 - (e) procedures for the retention of production records, and
 - (f) procedures for the tracking and documentation of product defects, claims and complaints;
 - ii. adequate separation of duties between quality assurance personnel and production personnel;
 - iii. procedures to conduct periodic quality assurance verification of production runs, including:
 - (a) sampling procedures, and
 - (b) a requirement for verification inspections and tests to be conducted by individuals who are independent of production; and
 - iv. procedures for production line verifications and tests requiring the use of properly calibrated and maintained test equipment that is routinely checked by the manufacturing facility.
- E. The need to conduct factory surveillance to determine that the applicant is capable of producing a product in conformance with the requirements of Section 7.4 D of this document may be waived prior to new certification if the manufacturing facility is currently under factory surveillance with the certification body for the same, or a similar, product standard. The certification body shall document in its records the decision to waive the factory surveillance prior to new certification.
- F. If the certification body accepts inspection reports, the certification body shall ensure that:
- i. each inspection report has been reviewed and completed for the applicable test standard(s), following documented procedures;

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- ii. documented procedures are in place to ensure that all inspection data originates with the test organization;
 - iii. documented procedures are in place to ensure that the organization conducting the inspection is accredited to ISO/IEC 17020:2012 for an appropriate scope, or qualified to ISO/IEC 17020:2012 or its equivalent using the NRTL's own qualification procedures;
 - iv. the qualification of the test organization for its scope of testing is verified on an annual basis, and when the test organization expands or modifies its approved scope of testing;
 - v. the certification body maintains documentation of technical correspondence and test interpretations; and
 - vi. the certification body maintains records of any procedural or product deficiencies identified and the corresponding corrective actions.
- G. If the certification body accepts inspections and test data from organizations that function as part of the International Electrotechnical Commission Certification Body (IEC-CB) scheme, the certification body recognized by OSHA shall:
- i. be recognized by OSHA for a test standard that is harmonized with the one being accepted under the IEC-CB scheme;
 - ii. retain control of, and responsibility for, the product certification scheme;
 - iii. physically inspect (i.e., perform a hands-on inspection of) each product model or type;
 - iv. review each certification body (CB) test certificate and CB test report to determine that the correct test standard(s) have been used and that any United States deviations have been applied;
 - v. use documented procedures for evaluation and interpretation of results;
 - vi. determine that components used comply with Section 7.4.J of these requirements; and
 - vii. ensure compliance with Section 7.9 of these requirements.
- H. If the certification body accepts inspections and test data from organizations that function as part of the International Electrotechnical Commission System for Certification to Standards Relating to Equipment For Use in Explosive Atmospheres (IECEx System), the certification body recognized by OSHA shall:

- i. be recognized by OSHA for a test standard that is harmonized with the one being accepted under the IECEx System;
 - ii. retain control of, and responsibility for, the product certification scheme;
 - iii. physically inspect (i.e., perform a hands-on inspection of) each product model or type;
 - iv. review each IECEx test certificate (ExCB) and IECEx test report (ExTR) to determine that the correct test standards have been used and that any United States deviations have been applied;
 - v. use documented procedures for evaluation and interpretation of results;
 - vi. determine that components used comply with Section 7.4.J of these requirements; and
 - vii. ensure compliance with Section 7.9 of these requirements.
- I. If the certification body does not accept inspection reports, inspections or test data from organizations described in Section 7.4 F, G or H of this document, the certification body's procedures shall state this.
- J. Procedures shall address the initial verification required when accepting safety critical components (components) for use in an end product. These procedures shall include:
- i. policies that address acceptance of component certifications from organizations recognized by OSHA (i.e., NRTLs);
 - ii. policies that address acceptance of component certifications from organizations not recognized by OSHA, including any additional factory surveillance activity that may be necessary;
 - iii. policies that address acceptance of uncertified components, including acceptance of certified components used outside the range of the components' certifications based on evaluation or testing in the end product, including policies addressing any additional factory surveillance activity that may be necessary; and
 - iv. a requirement to confirm that all limitations, engineering considerations, technical considerations, or conditions of acceptability stated as part of the component's certification are addressed in the end product.
- K. If a certification body accepts uncertified components or certified components used outside the range of the component certification, the certification body shall not evaluate the component for

use in the end product if it does not have the capabilities, including trained personnel, procedures, equipment, or facilities, to evaluate or test the component.

7.5 Review

There are no process policies supplementing Section 7.5 of ISO/IEC 17065:2012.

7.6 Certification decision

Procedures shall identify all the necessary steps that must occur before a certification body issues an authorization to mark or otherwise approves the release of the product, including the completion of factory surveillance at a new or an existing manufacturing facility making a new type of product.

7.7 Certification documentation

A. Procedures shall identify the information to include in the factory surveillance report, including, at a minimum:

- i. listing or certification number;
- ii. name of client (and if different, name of manufacturer);
- iii. factory location(s);
- iv. product description;
- v. location of testing;
- vi. product rating(s);
- vii. list of critical components;
- viii. critical or necessary constructional features and specifications that are compliant with the applicable test standard(s) and tests that were performed; and
- ix. limitations, conditions, or restrictions on the listing.

7.8 Directory of certified products

- A. Procedures and controls shall be in place to ensure information in the directory of certified products or record is added, deleted, or modified in a timely and accurate manner. The procedures shall also address the issuance, termination, and modification of the authorization to mark, and updating the listing records accordingly.
- B. Where a certification applies to a family or series of products, the directory of certified products shall identify the individual items covered by the certification.

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7.9 Surveillance

- A. Factory surveillance shall be conducted, at each manufacturing facility, of products that have been certified, to provide the certification body with confidence that certified products continue to be manufactured in compliance with applicable test standards. Factory surveillance shall involve an actual visit to each manufacturing facility.
- B. Certification body personnel shall conduct factory surveillance at manufacturing facilities without advance warning or notice to the manufacturer, except in situations when there is limited seasonal production, or when production has not been available for factory surveillance for a period exceeding 12 months.
- C. The certification body shall perform no fewer than four (4) factory surveillance visits per year at manufacturing facilities where any of the following situations occur:
 - i. the products are intended for use in hazardous locations;
 - ii. the certification body has evidence, or suspects, that the manufacturer has not been producing a product in conformance with product safety requirements or maintaining appropriate controls over its production process at a facility;
 - iii. the facility is in a geographic region where mislabeling or counterfeit labeling occurs frequently and there is a question about the manufacturer's ability to control and mark products correctly; or
 - iv. the certification body has evidence or suspects that the manufacturer is not using or controlling the certification body's certification mark(s) correctly.
- D. Factory surveillance may be performed less frequently, but no fewer than two (2) factory surveillance visits per year, at any facilities where concerns as described in Section 7.9.C do not exist, provided the manufacturer demonstrates ongoing quality assurance programs, control programs, and effectiveness in meeting product safety requirements. Evidence or justification that supports the decision to allow less than four (4) factory surveillance visits per year shall be retained.
- E. Each certified product type or model shall be physically inspected at least once every two years.
- F. The certification body may use the factory surveillance of a product at a manufacturing facility to meet the factory surveillance requirements for similar products manufactured at the same facility. Similar products are products grouped in a category based on the same or equivalent product manufacturing characteristics or technical requirements.

- G. Factory surveillance activities, and the content of reports or records of these activities, shall include or address the following, at a minimum:
- i. physical examination of the certified product being inspected compared with a document that describes the product, or, when no product is available at the time of a factory surveillance visit, examination of appropriate documentation (such as specification and purchasing documents);
 - ii. sample selection for subsequent countercheck testing, if appropriate;
 - iii. verification of in-process and final testing that is required by the applicable test standard(s), or that is regularly conducted at the factory as a part of the manufacturer's management system;
 - iv. confirming the use of accepted components;
 - v. monitoring the use and control of the certification body's mark;
 - vi. review of changes in the manufacturing process and quality controls; and
 - vii. calibration of equipment used in testing.
- H. Factory surveillance procedures shall address:
- i. justifying the factory surveillance frequency and changes to the frequency that the certification body has adopted for a facility or for a particular type of product;
 - ii. products having seasonal or non-regular production cycles, as well as any concerns that can exist with production lines that are intermittent;
 - iii. reinstatement of factory surveillance when the certification body confirms that a facility, subject to regular factory surveillance, does not have production or stock of certified products;
 - iv. adding, deleting, or modifying information about manufacturing locations for products tested and certified;
 - v. scheduling factory surveillances, verifying they have been performed, and taking any corrective action when the schedule is not met; and
 - vi. surveying the manufacturer's products, processes and/or management systems.
- I. The use of factory surveillance performed by another NRTL is acceptable. However, use of factory surveillance data provided by another NRTL does not relieve the certification body from

ensuring that required factory surveillances are performed. The certification body and the other NRTL shall have a formal agreement that allows for use of the other NRTL's factory surveillance data. In addition, procedures shall be in place that address:

- i. retention of all factory surveillance reports from the other NRTL, including retention of any nonconformances and corrective actions
 - ii. review of all factory surveillance reports from the other NRTL, including review of nonconformances and corrective actions; and
 - iii. how to address issues that may call into question the other NRTL's factory surveillance data, such as inadequate factory surveillance data or failure to address nonconformances.
- J. Procedures shall be in place for addressing deficiencies found during factory surveillance, including procedures for tracking these deficiencies and ensuring the deficiencies are resolved in an appropriate and timely manner.
- K. Procedures shall be in place for performing field inspections, including procedures for identifying where each field inspection will be performed, the nature and frequency of the activities that will be performed, and when such field inspections are necessary.

7.10 Changes affecting certification

If any NRTL-certified product is identified as nonconforming, or recalled for safety issues, the certification body shall immediately notify OSHA.

7.11 Termination, reduction, suspension or withdrawal of certification

There are no process policies supplementing Section 7.11 of ISO/IEC 17065:2012.

7.12 Records

There are no process policies supplementing Section 7.12 of ISO/IEC 17065:2012; however, to meet this policy, a certification body must follow all provisions in this policy regarding the keeping of records (see, e.g., Section 6.1 of this policy).

7.13 Complaints and appeals

There are no process policies supplementing Section 7.13 of ISO/IEC 17065:2012.

8 Management system policies

8.1 Options

To meet the management system policies, a certification body shall comply with all of Section 8, Option A, of ISO/IEC 17065:2012. Compliance with Section 8, Option B, does not constitute compliance with the management system policies.

8.2 General management system documentation (Option A)

There are no management system policies supplementing Section 8.2 of ISO/IEC 17065:2012.

8.3 Control of documents (Option A)

There are no management system policies supplementing Section 8.3 of ISO/IEC 17065:2012.

8.4 Control of records (Option A)

There are no management system policies supplementing Section 8.4 of ISO/IEC 17065:2012.

8.5 Management review (Option A)

There are no management system policies supplementing Section 8.5 of ISO/IEC 17065:2012.

8.6 Internal audits (Option A)

There are no management system policies supplementing Section 8.6 of ISO/IEC 17065:2012.

8.7 Corrective actions (Option A)

There are no management system policies supplementing Section 8.7 of ISO/IEC 17065:2012.

8.8 Preventive Actions (Option A)

There are no management system policies supplementing Section 8.8 of ISO/IEC 17065:2012.