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Testing and Calibration Laboratory Accreditation Requirements

Applies to laboratories seeking accreditation for defined testing, calibration and, where included in the requested scope, sampling activities.

Primary standard	**ISO/IEC 17025:2017**
Document owner	International Services for Certification Bodies
Review trigger	Standard, scheme, regulatory or ISCB process change

Document status and use

This ISCB applicant guide states the evidence and operating controls normally expected for this programme. It does not reproduce or replace the applicable ISO or ISO/IEC standard. Applicants must hold an authorised current copy and comply with all applicable requirements, legislation, scheme rules and formally issued ISCB criteria.

References to IAF or ILAC publications identify technical criteria that may be relevant. They do not by themselves state or imply that ISCB is an IAF or ILAC arrangement signatory.

01

Applicable framework

The assessment hierarchy begins with the primary standard and includes applicable normative, regulatory, scheme-owner and ISCB documents. ISCB will identify the controlling criterion if requirements conflict.

- ISO/IEC 17025:2017 is the primary competence standard.
- ISO/IEC 17011:2017 governs ISCB's accreditation process and decisions.
- Applicable ILAC policies and guidance are used where relevant to the requested scope, including current requirements on proficiency testing, metrological traceability, measurement uncertainty and scopes.

02

Core organisational requirements

Legal status and responsibility

Be a legally identifiable entity, or a defined part of one, that can be held responsible for conformity-assessment activities, contracts and decisions.

Impartiality and independence

Identify, analyse, treat, monitor and record threats from ownership, finance, relationships, consultancy, commercial pressure and self-review.

Confidentiality and information security

Protect confidential information, personal data, intellectual property and electronic records; control any legally required disclosure.

Organisation and governance

Define authority, responsibilities, reporting lines and safeguards; assign technical work, review and decisions to competent and appropriately independent functions.

Competence and resources

Set role-specific competence criteria; evaluate, authorise, monitor and re-evaluate personnel; control facilities, equipment, software and external resources.

Controlled operations

Accept work only after confirming capability; use controlled methods and records; handle deviations; review outputs; base decisions on sufficient objective evidence.

Management system

Maintain document and record control, risks and opportunities, complaints, appeals, nonconforming work, corrective action, internal audit, management review and improvement.

Accreditation claims

Limit certificates, symbols and claims to the granted scope and amend them immediately after suspension, reduction, withdrawal or expiry.

03 Service-specific technical requirements

1. Define the proposed scope by matrix, measurand or analyte, method, item or material, range and capability as applicable.

2. Demonstrate method selection, verification or validation, measurement uncertainty where relevant, decision rules, quality control and assurance of result validity.

3. Maintain metrological traceability through suitable calibration, reference materials and documented traceability chains.

4. Establish competence criteria, authorization and continuing monitoring for all personnel affecting laboratory results.

5. Control facilities, environmental conditions, equipment, reference standards, reagents, software, data integrity, externally provided services and handling of test or calibration items.

6. Participate in suitable proficiency testing or interlaboratory comparison and maintain a justified participation plan.

04 Minimum application and readiness evidence

Submit current, approved documents and representative implementation records. Templates without operational evidence are not sufficient.

01	Legal identity, organisation chart and impartiality/confidentiality controls
02	Scope schedule and current method list
03	Competence matrix, authorizations and training records
04	Method verification/validation and uncertainty records
05	Equipment register, calibration, maintenance and intermediate checks
06	PT/ILC plan, results and corrective actions
07	Internal audit, management review, risks, complaints and corrective-action records
08	Representative reports or certificates and completed contract reviews

05

Assessment, decision and continued accreditation

Application and scope review

ISCB reviews legal identity, requested scope, locations, resources, readiness and applicable criteria before quotation and assessment planning. Acceptance of an application is not a promise of accreditation.

Assessment

Assessment may include document review, office or remote assessment, on-site technical assessment, witnessing, interviews, record tracing and evaluation of representative activities. The mix depends on scope and risk.

Nonconformities and decision

The applicant must determine causes, correct the issue, implement proportionate corrective action and provide evidence of effectiveness within the notified period. Accreditation decisions are independent from assessment and limited to demonstrated competence.

Maintenance

Accredited bodies must remain competent, comply with surveillance and reassessment, notify significant changes without delay, cooperate with witnessing and record access, address complaints and nonconformities, and control all accreditation claims.

06

Principal references

- ISO/IEC 17025:2017
- ILAC P9 (proficiency testing/interlaboratory comparisons)
- ILAC P10 (metrological traceability)
- ILAC P14 (measurement uncertainty in calibration)
- ILAC G8, G17 and G18, as applicable

External editions can change. The edition stated in the accreditation agreement, transition notice or other formal ISCB communication controls the assessment. Verify current editions before use.

Prepare	Complete the readiness assessment and organise objective evidence.
Apply	Submit the application and proposed scope for formal review.