|  |  |  |  |
| --- | --- | --- | --- |
| **Name of entity being assessed** |  | **Name of assessors SMS or RMS** |  |
| **Date of assessment** |  | **Assessor name** |  |
| **Instructions** | For each question highlight in red the risk and document below each question your reason why you have selected each risk. Once you have answered all questions highlight in red below the overall risk level along with any additional comments. | | |
| **Section 1** | | | |
| **Category** | **Low Risk** | **Medium Risk** | **High Risk** |
| **Maturity (years since ICOP scheme approval or accreditation)** | > 5 Years | > 3-5 Years | 0-3 Years |
| Comments |  | | |
| **Section 2** | | | |
| **Level of Change** | **Low** | **Medium** | **High** |
| **Scheme Requirements** | Only Minor Changes (e.g., resolutions) | Supplementary Standard(s) Change (e.g., IAF Mandatory Documents) | Change in Primary Requirements (e.g., ISO Standards, IAQG ICOP Scheme Standards) |
| Comments |  | | |
| **Technical Leader for ICOP Scheme** | No Change | 1 Change | > 1 Change |
| Comments |  | | |
| **Decision-Makers** | No Change | 1 Change | > 1 Change |
| Comments |  | | |
| **AB or OP Assessors / AAB or TPAB Evaluators** | No Change or Not Applicable | >0% - <50% Change | >50% Change |
| Comments |  | | |
| **Section 3** | | | |
| **Performance / Confidence Risk** | **Low** | **Medium** | **High** |
| **Previous Oversight Assessment Nonconformity Report (NCR) Trend** | Decreasing or No Change | Increasing | Not Applicable |
| Comments |  | | |
| **Previous Oversight Assessment Results** | <1 NCR | >1 to 4 Minor NCRs and/or 1 Major NCR | >4 Minor NCRs and/or >1 Major NCR |
| Comments |  | | |
| **Complaints** | 0 Upheld Complaints | <2 Upheld Complaints | >2 Upheld Complaints |
| Comments |  | | |
| **Responsiveness to Feedback** | All Responses in Target and all Feedback has Complete and Appropriate Answers | <3 Response Targets Missed; all Answered with Complete and Appropriate Answers | >3 Response Targets Missed or Some Feedback does not have Complete and Appropriate Answers |
| Comments |  | | |
| **Technical Suspensions** | 0 | Not Applicable | >1 |
| Comments |  | | |
| **Change in Client Numbers** | < +/- 2% | Between +/- 2% and +/-20% | > +/- 20% |
| Comments |  | | |
| **Section 4 - (Only to be used to determine the risk category for each CB)** | | | |
| **CB Performance Risk** | **Low** | **Medium** | **High** |
| **Previous AB Assessment Results** | <1 NCR | >1 to 4 NCRs | >4 NCRs |
| Comments |  | | |
| **Required Data in OASIS Database in <90 days of a Closing Meeting or 30 Days after a Certification Decision** | 0 | <5 Timelines Exceeded | >5 Timelines Exceeded |
| Comments |  | | |
| **AB NCRs not Closed by CB within 90 Days** | 0 | Not Applicable | >1 Timeline Missed |
| Comments |  | | |
| **% of Certificates Expired** | <1% | >1% and <2% | >2% |
| Comments |  | | |
| **Auditors** | No Change or Not Applicable | >0% to <20% Change | >20% Change |
| Comments |  | | |
| **OVERSIGHT ASSESSMENT ACTIVITY (Based on Table 4 - 9104-2)** | | | |
| **Overall Risk Level** | Low / Med / High | **Oversight assessment activity** |  |
| Comments |  | | |