Policy and Guidance on Submitting Documents Prior to the On-Site Assessment

1. **Background**

1.1. This document describes the policies and procedures for documentation that laboratories are required to submit prior to their on-site assessment. This policy is applicable to laboratories seeking or maintaining AASHTO Accreditation. Laboratories that fail to submit the required documentation as described by this policy may be subject to surcharge fee as described on the Laboratory Assessment Program Test and Fees page. See Section 4 of this document for additional information.

1.2. This policy is only for on-site assessments through AASHTO re:source that cover the testing scopes of aggregate, asphalt binder, asphalt mixture, emulsified asphalt, iron and steel, pavement preservation, rock, soil, and sprayed fire-resistive material. This policy is not applicable to the Cement and Concrete Reference Laboratory (CCRL). For information on CCRL visit www.ccrl.us or email them at ccrl@astm.org.

2. Terminology

2.1. *in-sequence assessment*–an assessment that takes place in AASHTO re:source's normal cycle of visiting laboratories within a geographical region.

2.2. *new laboratories*– laboratories that are applying for initial AASHTO Accreditation and are not currently accredited.

2.3. *out-of-sequence assessment*- an assessment that takes place outside of AASHTO re:source's normal cycle of visiting laboratories within a geographical region.

2.4. *supplemental assessment* – an assessment that is an addition to a laboratory's regular assessment in order to add standards to their current AASHTO accreditation scope.

2.5. *surveillance A assessment* – an abbreviated in-sequence assessment that is conducted in order to incorporate a laboratory, that previously had an initial assessment out-of-sequence assessment, into the regular assessment tour schedule.

2.6. *surveillance B assessment* – an assessment for laboratories that are required to undergo an additional assessment, as required by an Administrative Task Group (ATG) decision, in order to maintain or obtain AASHTO Accreditation.

3. Procedure

3.1. **New Laboratories / Initial Accreditation**

3.1.1. Register for an AASHTO re:source online account.

3.1.1.1. To register, complete the Registration Request Form. An Access Code and Passkey will then be issued and the user will be able to create a unique login associated with their email address and a password of their choosing.

3.1.2. Request an assessment:

3.1.2.1. Login to the AASHTO re:source website, click Request an Assessment, and select the desired quality system standard(s) and test method(s) (Steps 2 and 3).

3.1.2.2. Select the box to "Request an Out-of-Sequence assessment" (Step 4).

3.1.2.3. Choose the desired assessment date.

3.1.2.4. Submit the request. A representative from AASHTO re:source will contact you and ask you to submit evidence that you have a quality management system before your request will be accepted. Your assessment will not be scheduled until evidence is submitted.

Note 1- To ensure that we have the most current version of your quality management system for the assessment, you will be asked to submit this information again once your assessment has been scheduled.

3.1.3. The laboratory receives an announcement letter via email from AASHTO re:source indicating that assessment has been scheduled. This document will include a due date for which the documents must be submitted.

3.1.4. Submit documentation prior to due date listed in the announcement letter.

3.1.4.1. Navigate to your laboratory's home page on the AASHTO re:source website and scroll to the section of the page entitled "Laboratory Assessment History" and locate the "Pre-Assessment" button for the requested assessment.

3.1.4.2. Submit the following required documents on the Accreditation Events page on the AASHTO re:source website:

- License Number for the Registered Professional Engineer (P.E.) who has overall technical responsibility for the laboratory or ATG number for previous approval of a non-P.E. (see Note 2)
- Quality System Policies and Procedures (Quality Manual)- Conforming to the requirements of AASHTO R 18 and any ASTM quality system standards (see Note 3)
- A current organizational chart
- Evidence of technician certification, if necessary, to meet the requirements of any requested ASTM quality system standards C1077, D3666, D3740, and E329 (see AASHTO Accreditation Policy on Certifications for additional information).

Note 2- Section 3.4 of the AASHTO Accreditation Program Procedures Manual for Accreditation of Construction Materials Testing Laboratories requires the Technical Director, however named, to be a registered engineer or a person with equivalent science-oriented education or experience. If the Technical Director is not a registered professional engineer, their qualifications will be reviewed by AASHTO re:source's Administrative Task Group (ATG) for approval. Additional questions regarding this approval process should be sent to aap@aashtoresource.org.

Note 3- A Quality Manual typically contains policies and procedures as described in Table 1. It is not necessary for a laboratory to submit records (training, equipment, internal audits, management reviews) prior to the on-site assessment. These items will be reviewed on-site.

3.1.4.3. Laboratories that fail to submit the required documentation prior to the established due date will have their documentation reviewed on-site during the assessment. A surcharge fee as described on the Laboratory Assessment Program Test and Fees page will be added to the invoice for the assessment.

3.2. **In-Sequence Assessment / Currently Accredited / Surveillance A Assessments**

3.2.1. Request an assessment:

3.2.1.1. Login to the AASHTO re:source website, click Request an Assessment, and select the desired quality system standard(s) and test method(s) (Steps 2 and 3).

3.2.2. Submit the request.

3.2.3. The laboratory receives an announcement letter via email from AASHTO re:source indicating that assessment has been scheduled. This document will include a due date for which the documents must be submitted.

3.2.4. Submit documentation prior to due date listed in the announcement letter.

3.2.4.1. Navigate to your laboratory's home page on the AASHTO re:source website and scroll to the section of the page entitled "Laboratory Assessment History" and locate the "Pre-Assessment" button for the requested assessment.

3.2.4.2. Submit the following required documents on the Accreditation Events page on the AASHTO re:source website:

- License Number for the Registered Professional Engineer (P.E.) who has overall technical responsibility for the laboratory or ATG number for previous approval of a non-P.E. (see Note 2)

- Quality System Policies and Procedures (Quality Manual)- Conforming to the requirements of AASHTO R 18 and any ASTM quality system standards (see Note 3)
- A current organizational chart
- Evidence of technician certification, if necessary, to meet the requirements of any requested ASTM quality system standards C1077, D3666, D3740, and E329 (see AASHTO Accreditation Policy on Certifications for additional information).

Note 4- A Quality Manual typically contains policies and procedures as described in Table 1. It is not necessary for a laboratory to submit records (training, equipment, internal audits, management reviews) prior to the on-site assessment. These items will be reviewed on-site.

Note 5- Section 3.4 of the AASHTO Accreditation Program Procedures Manual for Accreditation of Construction Materials Testing Laboratories requires the Technical Director, however named, to be a registered engineer or a person with equivalent science-oriented education or experience. If the Technical Director is not a registered professional engineer, their qualifications will be reviewed by AASHTO re:source's Administrative Task Group (ATG) for approval. Additional questions regarding this approval process should be sent to aap@aashtoresource.org.

3.2.4.3. Laboratories that fail to submit the required documentation prior to the established due date will have their documentation reviewed on-site during the assessment. A surcharge fee as described on the Laboratory Assessment Program Test and Fees page will be added to the invoice for the assessment.

3.3. **Supplemental Assessment-** Supplemental Assessments are typically completed remotely. See the Policy and Guidance on Remote Assessments for information on Document Submittal.

3.4. **Surveillance B Assessment**

3.4.1. Request an assessment:

3.4.1.1. Login to the AASHTO re:source website, click Request an Assessment, and select the quality system standard(s) and test method(s) as required by the AASHTO Accreditation Program and/or AASHTO re:source (Steps 2 and 3).

3.4.1.2. Select the box to "Request an Out-of-Sequence assessment" (Step 4).

3.4.1.3. Choose the desired assessment date.

3.4.1.4. Submit the request.

3.4.2. Submit Documentation:

3.4.2.1. Navigate to your laboratory's home page on the AASHTO re:source website and scroll to the section of the page entitled "Laboratory Assessment History" and locate the "Pre-Assessment" button for the requested assessment.

3.4.2.2. Submit the required documents and records as described on the Accreditation Events page.

Table 1: Typical Components of a Quality Management System by Standard

Quality Management System Component	**Quality System Standard**
Organization and Management Structure	AASHTO R 18
Organizational Chart	AASHTO R 18
Position Descriptions	AASHTO R 18 ASTM D3740*
Biographical Sketches	AASHTO R 18 ASTM D3666*
Procedures for Training Staff	AASHTO R 18
Procedures for Ensuring Staff Competency	AASHTO R 18 ASTM D3740*
Procedures for Internal Audits	AASHTO R 18 ASTM D3666* ASTM D3740*
Procedures for Corrective Action When Nonconforming Work is Discovered	AASHTO R 18 ASTM C1077*
Policies on Records Retention	AASHTO R 18 ASTM E329*
Procedures for Ensuring Equipment Calibration, Standardization, Check and Maintenance Activities are Performed on Time	AASHTO R 18
Procedure for Storage, Retention, and Disposal of Test Samples	AASHTO R 18
Procedure for Producing Test Reports	AASHTO R 18
Policy Regarding Subcontracting	AASHTO R 18
Procedures for Monitoring the Validity of Test Results	AASHTO R 18 ASTM D3666*
Procedures for Transfer of Samples (Aggregate) to From the Field to the Laboratory	ASTM C1077
Procedures for Ensuring Quality of External Services	ASTM C1077
Typical Test Report Forms	ASTM D3666
List Showing Applicable Dates of Qualification, Accreditations, and Recognition of the Agency by Others	ASTM D3740
Procedures to Ensure the Protection of Clients' Confidential Information	ASTM E329
Quality Policy Statement and Policies and Objectives for Commitment to Good Practice and Quality of Inspection or Testing Services	ASTM E329
Procedures for Document Control	ASTM E329
Identification of Agency's Approved Signatories	ASTM E329
Agency's Scope of Inspection or Testing	ASTM E329
Procedures for Review of All New Services	ASTM E329
Procedures for Departures from Documented Policies, Procedures, or Standards	ASTM E329
Procedure for Purchase, Reception, and Storage of Consumable Materials	ASTM E329

**Laboratories must meet the requirements of AASHTO R 18 as a prerequisite to any ASTM quality management system standards. In some cases, the ASTM Quality System Standard contains additional requirements beyond those stated in AASHTO R 18 for a particular component.*

4. Document Review

4.1. A representative of AASHTO re:source will review the documentation submitted.

4.2. **Laboratories Seeking Initial Accreditation**- the laboratory will be contacted if the documentation submitted is incomplete and the assessment will not be scheduled until additional documentation is submitted. At a minimum, in order to be considered complete, the laboratory must include the items shown in Table 2. Once the assessment has been scheduled, laboratories will be asked to submit the most current version of their documentation once more. Laboratories that submit incomplete documentation or fail to submit documentation by the due date will be charged a surcharge fee as described on the Laboratory Assessment Program Test and Fees page and will be added to the invoice for the assessment. In this case, the documents will be reviewed during the on-site assessment. At a minimum, in order to be considered complete, the laboratory must include the items shown in Table 2.

4.3. **In-Sequence Assessment / Currently Accredited / Surveillance A Assessments**- Laboratories that submit incomplete documentation or fail to submit documentation by the due date will be charged a surcharge fee as described on the Laboratory Assessment Program Test and Fees page and will be added to the invoice for the assessment. In this case, the documents will be reviewed during the on-site assessment. At a minimum, in order to be considered complete, the laboratory must include the items shown in Table 2.

4.4. **Surveillance B and Supplemental Assessments-** Submittal of documentation prior to the assessment is not typically required but is encouraged. For some Surveillance B assessments, the laboratory may be asked to submit records to AASHTO re:source before the assessment will be scheduled.

Note 4- Laboratories are encouraged to contact us at lap@aashtoresource.org with any questions regarding document submittal.

Table 2: Minimum Quality System Components Required for Document Submittal for Laboratories Seeking or Maintaining Accreditation

Quality Management System Component	Quality System Standard
Organizational Chart	AASHTO R 18
Procedures for Training Staff	AASHTO R 18
Procedures for Ensuring Staff Competency	AASHTO R 18 ASTM D3740*
Procedures for Internal Audits	AASHTO R 18 ASTM D3666* ASTM D3740*

**Laboratories must meet the requirements of AASHTO R 18 as a prerequisite to any ASTM quality management system standards. In some cases, the ASTM Quality System Standard contains additional requirements beyond those stated in AASHTO R 18 for a particular component.*

4.5. Any findings that result from the audit of the submitted documentation will be discussed with the laboratory during the close-out meeting at the end of the on-site assessment and will be included in the on-site assessment report.