Policy and Guidance on Supplemental and Surveillance Assessments

1. Background and Rationale

1.1. This policy is intended to clarify the types of assessments performed by AASHTO re:source that are in addition to in-sequence assessments, including when it is appropriate to perform each type of non-regular assessment, how to request an atypical assessment and what to expect before, during, and after an atypical assessment.

2. Terminology

2.1. *supplemental assessment* – an assessment for a laboratory to add new standard(s) to their current scope of accreditation before or after the in-sequence assessment.

2.2. *assessment tour* – the process of completing the compulsory regular AASHTO re:source and/or CCRL assessment for every laboratory seeking or maintaining accreditation. In order to maintain accreditation, all accredited laboratories are required to participate in every AASHTO re:source and/or CCRL assessment tour.
DISCUSSION – One assessment tour takes approximately two years to complete, and is performed in a sweep across the country from the east coast to the west coast (for more information on where we are currently performing assessments, please see the Estimated Assessment Schedule).

2.3. *in-sequence assessment* – an assessment that takes place within the scheduled assessment tour.
DISCUSSSION – In order to maintain accreditation, all laboratories are required to receive a full assessment each tour. For more information, see The AASHTO Accreditation Program Procedures Manual for the Accreditation of Construction Materials Testing Laboratories. This is often referred to as a "regular assessment" or a "regular tour assessment."

2.4. *on-site assessment* – a laboratory assessment that takes place at the laboratory's testing facility.

2.5. *out-of-sequence assessment* – an assessment that takes place outside of the predicted assessment tour.

2.6. *remote assessment* – a laboratory assessment conducted remotely via video conferencing software, such as Zoom or Microsoft Teams.

2.7. *surveillance A assessment* – an abbreviated in-sequence assessment that is conducted in order to incorporate a laboratory, that previously had a full initial out-of-sequence assessment, into the regular tour. Surveillance A assessments are conducted during the regular assessment tour.

2.7.1. Surveillance A assessments are conducted if the initial out-of-sequence assessment was completed between six and twelve months before the in-sequence assessments for that area. If the initial out-of-sequence assessment was conducted between zero and six months before the in-sequence assessments, a surveillance A assessment may not be necessary. For more information, see The AASHTO Accreditation Program Procedures Manual for the Accreditation of Construction Materials Testing Laboratories.

2.7.2. Surveillance A assessments typically last approximately half the time of the initial out-of-sequence assessment because only approximately half the accredited test methods are performed; however, accreditation will not be affected for those standard(s) and/or test method(s) not performed during the Surveillance A assessment.

2.8. *surveillance B assessment* – a full assessment for laboratories that performed poorly during the in-sequence assessment and must be re-assessed to ensure competency and ability to meet AAP criteria.
DISCUSSION – Surveillance B assessments may occur several months after the in-sequence assessment and will therefore be out-of-sequence assessments. For more information, see The AASHTO Accreditation Program Procedures Manual for the Accreditation of Construction Materials Testing Laboratories.

3. Application Process

3.1. Surveillance A Assessment

3.1.1. Request an assessment:

3.1.1.1. Surveillance A assessments are conducted during the regular assessment tour. When directed by AASHTO re:source, login to the AASHTO re:source website, click Request an Assessment, and select the desired quality system standard(s) and test method(s).
NOTE 1 – Beginning approximately six months before assessments are expected to take place in an area, AASHTO re:source shall send emails to all of the laboratories in that area directing them to request an in-sequence assessment.

3.1.1.2. Submit the assessment request as a regular assessment. Include every test method and quality system standard for which the laboratory needs accreditation.

3.1.2. If the laboratory had an initial out-of-sequence assessment six to twelve months before the in-sequence assessments begin in that area, an AASHTO re:source staff member will change the assessment type from “Regular” to “Surveillance A” and will remove approximately half of the test method(s) from the request. Greater attention will be given to test methods that had multiple findings during the initial assessment.

3.2. Surveillance B Assessment

3.2.1. When directed by the AASHTO Accreditation Program, request an assessment:

3.2.1.1. Login to the AASHTO re:source website, click Request an Assessment, and select the required quality system standard(s) and test method(s) as directed by the AASHTO Accreditation Program.

3.2.1.2. On Step 4, select the box to “Request an Out-of-Sequence assessment.”

3.2.1.3. Submit the assessment request.

3.3. Supplemental Assessment

3.3.1. Unless otherwise indicated by the AASHTO Accreditation Program, supplemental assessments are always remote assessments. For more information on submitting a request, please see the Policy and Guidance on Remote Assessments.

4. Scheduling and Pre-Assessment Process

4.1. Location of Assessment

4.2. Surveillance A and Surveillance B Assessments: Unless remote assessments are being utilized as an emergency measure in place of on-site assessments, this assessment will always take place on-site.

4.3. Contact from AASHTO re:source and Announcement Letter

4.4. Surveillance A Assessment: Laboratories will be sent an email with an announcement letter confirming the date and the location of the assessment. Laboratories will typically receive the date of their assessment 4 – 6 weeks prior to the start date.

4.5. Surveillance B Assessment: The AASHTO Accreditation Program and AASHTO re:source assessor will work closely with the laboratory to select the assessment date. After a date is agreed upon, laboratories will be sent an email with an announcement letter confirming the date of the assessment.
NOTE 2 – Any applicable out-of-sequence fees will be discussed at this time.

5. Assessment Process

5.1. Opening Meeting: The assessor shall conduct a brief opening meeting to discuss the purpose of the assessment and accreditation criteria (if applicable), scope of the assessment, and the assessment schedule.
NOTE 3 – It is recommended that the laboratory manager, quality manager, and all technicians involved in the assessment are present during the opening meeting.

5.2. Test Method Procedures: The laboratory shall be prepared to demonstrate the entirety of the requested test method procedures. All samples used for demonstration shall be prepared prior to the assessment using the Assessment Prep Sheets.

5.3. Quality Documentation Review

5.3.1. Surveillance A Assessments: The AASHTO re:source assessor shall conduct a full review of the laboratory's quality management system, with extra attention to findings from the past report.

5.3.2. Surveillance B Assessments: The AASHTO re:source assessor shall conduct a full review of the laboratory's quality management system, with extra attention to items or issues as directed by the AASHTO Accreditation Program.

5.4. Preliminary Report and Closing Meeting: The assessor shall share the preliminary report with the laboratory and conduct a brief meeting to discuss any findings noted during the assessment.
NOTE 4 – It is recommended that the laboratory manager, quality manager, and all technicians involved in the assessment are present during the closing meeting.

6. Post-Assessment Process

6.1. The laboratory shall receive an email notification that the final report is ready to view, and nonconformities can be resolved at this time.

6.2. The laboratory shall be invoiced for the assessment.

NOTE 5 – For more information on laboratory assessment fees, please see the AASHTO re:source website.

6.3. If all nonconformities are resolved within the 60-day time limit, the laboratory shall be granted accreditation for and/or maintain accreditation for the standard(s) requested. For more information, see The AASHTO Accreditation Program Procedures Manual for the Accreditation of Construction Materials Testing Laboratories.

7. Assessment Fees

7.1. See the LAP Fees page for information on assessment fees.

8. Resources

8.1. The AASHTO Accreditation Program Procedures Manual for the Accreditation of Construction Materials Testing Laboratories

8.2. Laboratory Assessments page

8.3. Remote Assessments page

8.4. Assessment Prep Lists