

ACCS 0:2026

General Scheme Rules

Governing the operation of the Age Check Certification Scheme, including requirements for Conformity Assessment Bodies and Authorised Test Laboratories

This is a publicly available specification created by the Age Check Certification Scheme Ltd. It is subject to the intellectual property rights of the Scheme and may not be copied, used in a retrieval system or utilised without the express consent of the Scheme, save that it may be mentioned by name as a reference document with appropriate attribution and a link to the document itself.

© Age Check Certification Scheme Ltd 2026

All rights reserved.



Contents

Introduction	6
Scheme Objectives	7
1. Scope	8
1.1 Purpose of this document	8
1.2 Application	8
1.3 Schemes covered by these Rules	9
1.4 Relationship to scheme-specific documents	9
1.5 Schemes not covered	10
1.6 Geographic scope	10
2. Normative References	11
2.1 General	11
2.2 UKGDPR Approved Schemes	12
2.3 Legal Provisions	12
3. Terms and Definitions	13
3.1 Interpretation	13
3.2 Parties	13
3.3 Schemes and Certification	16
3.4 Nonconformity and Continuous Improvement	17
3.5 Agreements and Documents	18
3.6 Financial	19
3.7 Regulatory	19
4. Regulations Governing the Use of the Certification Mark	20
4.1 General	20
4.2 Persons authorised to use the mark	20
4.3 Characteristics being certified	21
4.4 How the certification body tests those characteristics	21
4.5 Fees to be paid	21
4.6 Procedure for resolving disputes	21
4.7 Condition of the Regulations	21
4.8 Amendment of the regulation not without the consent of the register	22
5. Competence of Personnel	23

5.1	General Principle.....	23
5.2	Competence of Scheme Owner Personnel.....	23
5.3	Competence of CAB Personnel	24
5.4	Competence matrix.....	26
5.5	Competence of ATL Personnel.....	26
5.6	Competence of Subcontractors	27
5.7	Scheme Owner Training and Competence Support.....	28
6.	Certification Process.....	30
6.1	Conformity Assessment Bodies	30
6.2	Authorised Test Laboratories	30
6.3	Certification Process Architecture	30
6.4	Scheme Owner Reference Templates	31
6.5	Applications	32
6.6	Application Review.....	32
6.7	Novel Applications.....	33
6.8	Sanctions, PEP and Adverse Media Screening.....	34
6.9	Initial Call and Scoping.....	36
6.10	Certification Agreement	36
6.11	Pre-Assessment and Permitted Advisory Activities	38
6.12	Evaluation Planning.....	40
6.13	Recognition of Prior Conformity Assessment Results.....	43
6.14	Stage One Evaluation	44
6.15	Stage One Quality Assurance Review.....	45
6.16	Stage Two Evaluation	48
6.17	Nonconformity Management	51
6.18	Evaluation Review	52
6.19	Certification Decision	54
6.20	Surveillance and Certification Monitoring.....	58
6.21	Extension of Scope	64
7.	Certificates of Conformity, Schedules and the Registry	68
7.1	Certification Documentation Structure.....	68
7.2	Certificate of Conformity	68
7.3	Schedule of Certification	70
7.4	Practice Statements	71
7.5	ACCS Public Registry.....	72

8.	Changes Affecting Certification, Nonconformities and Enforcement.	74
8.1	Changes Initiated by the Certification Client	74
8.2	Changes Arising Other than from the Certification Client	75
8.3	Nonconformities Identified During Period of Certification	77
8.4	Minded to Take Action	78
8.5	Suspension of Certification	80
8.6	Withdrawal and Termination of Certification	81
8.7	Voluntary Transfer of Certification Between Participating CABs	82
8.8	Withdrawal of CAB Approval or Resignation of a Participant CAB	85
8.9	Acquisition and Merger of a Participating CAB	90
9.	Complaints and Appeals	91
9.1	Overview and public access	91
9.2	Categories of complaint and appeal	91
9.3	General principles applicable to all categories	92
9.4	Complaints against the service of the Participating CAB or Registered ATL	92
9.5	Complaints against a Certification Client	93
9.6	Appeals against certification decisions	93
9.7	Complaints about the scheme	95
10.	Records	97
10.1	General Obligation	97
10.2	Certification Records - Participant CABs	97
10.3	Scheme Oversight Records - Scheme Owner	98
10.4	Registry Records - Scheme Owner	99
10.5	Complaints and Appeals Records	99
10.6	Personal Identifiable Information in Certification Records	100
10.7	Data Protection Compliance	100
10.8	Access to Records	100
10.9	ATL Records	101
11.	Impartiality	103
11.1	Commitment to Impartiality	103
11.2	Scheme Owner Impartiality - Relationship with Participating CABs	103
11.3	Scheme Owner financial interests	104
11.4	Impartiality Panel	104
11.5	Impartiality Risk Register	106
11.6	Conflict of Interest - Declaration and Management	106

11.7	CAB Impartiality Obligations.....	107
11.8	ATL Impartiality Obligations	108
12.	Confidentiality and Transparency	109
12.1	Commitment to Confidentiality and Transparency	109
12.2	Confidentiality Obligations - Scheme Owner.....	109
12.3	Confidentiality Obligations - Participating CABs.....	110
12.4	Confidentiality Obligations - Registered ATLs.....	110
12.5	Permitted Disclosures.....	111
12.6	Integrity of Certification Reports and Decisions	112
12.7	Fair Competition Between Participating CABs and ATLs.....	112
12.8	Transparency - Public Information Obligations	113
13.	Scheme Development, Review and Continuous Improvement	114
13.1	Commitment to Continuous Improvement.....	114
13.2	Periodic review.....	114
13.3	Triggered review	115
13.4	Horizon Scanning.....	115
13.5	Stakeholder Engagement	116
13.6	Consultation on proposed scheme changes.....	116
13.7	Transition periods	117
13.8	Stakeholder forum	118
13.9	Continuous Improvement.....	118
14.	Fees.....	120
14.1	Principle	120
14.2	Audit Effort Calculation	120
14.3	Scheme Levy.....	120
14.4	Pre-Assessment Fees.....	121
14.5	ATL Fees	121
14.6	Transparency - Public Fee Information	121
14.7	No Undue Financial Conditions.....	122
Annex A -	Scheme Documents, Forms and Reference Templates	123
A.1	ACCS Procedure Documents (Informative)	123
A.2	ACCS Scheme-Specific Documents (Normative).....	124
A.3	ACCS Forms and Templates (Informative).....	124
A.4	ACCS Learning and Development (Informative)	125



Introduction

These General Scheme Rules set out the governance framework for the Age Check Certification Scheme (ACCS), operated by Age Check Certification Scheme Ltd as Scheme Owner. They establish the rules under which Conformity Assessment Bodies (CABs) and Authorised Test Laboratories (ATLs) are admitted to and operate within the scheme, the certification process framework applicable across all scheme-specific documents and the obligations of the Scheme Owner in relation to scheme governance, integrity and sustainability.

This document also constitutes the Regulations Governing the Use of the Certification Mark, as required by the UK Intellectual Property Office in respect of registered certification mark UK 3467707, in accordance with the Trade Mark Rules 2008.

The scheme has been developed to comply with:

- ISO/IEC 17065:2012 - Conformity assessment - Requirements for bodies certifying products, processes and services
- ISO/IEC 17067:2013 - Conformity assessment - Fundamentals of product certification and guidelines for product certification schemes
- The requirements of the Trade Mark Rules 2008

Where scheme-specific documents operate as approved certification schemes under Article 42 of UK GDPR, those documents additionally comply with the UK Information Commissioner's requirements for approved certification schemes.

Technical assessment requirements including applicable standards, evaluation criteria, classification accuracy requirements and certification-specific obligations for scheme clients are set out in the applicable scheme-specific document. This document applies across all certification schemes operated under the Age Check Certification Scheme. A current list of schemes, together with their applicable standards and any additional regulatory requirements, is maintained at www.accscheme.com/schemes.

Applications for certification may be made to any Conformity Assessment Body admitted to the scheme. A current list of admitted CABs is maintained at www.accscheme.com/cabs.



Scheme Objectives

The Age Check Certification Scheme is established to:

- Validate and certify systems and components that help prevent harm to children and mitigate nuisance or risk associated with access to age-restricted goods, content, services, venues and spaces
- Improve the quality, consistency and performance of age assurance methods across different contexts of use
- Provide consumers, regulators, law enforcement authorities and commercial relying parties with a trusted certification framework to identify suitable providers and components
- Support organisations in demonstrating compliance with legal, regulatory and data protection obligations, including UK GDPR and equivalent international provisions
- Mitigate risks of non-compliance, including criminal or civil sanctions, reputational damage and licensing or regulatory action



1. Scope

1.1 Purpose of this document

1.1.1 These General Scheme Rules establish the governance framework for the Age Check Certification Scheme.

1.1.2 They set out:

- the responsibilities of the Scheme Owner in relation to scheme governance, integrity, financial sustainability and stakeholder engagement
- the requirements and obligations applicable to Conformity Assessment Bodies (CABs) admitted to operate the scheme
- the requirements and obligations applicable to Authorised Test Laboratories (ATLs) registered under the scheme
- the certification process framework applicable across all ACCS scheme-specific documents, including the application process, certification agreement requirements, non-conformance management, certification lifecycle, and public registry
- the Regulations Governing the Use of the Certification Mark, as required by the UK Intellectual Property Office in respect of registered certification mark UK 3467707
- the scheme's arrangements for complaints, appeals, impartiality and confidentiality

1.2 Application

1.2.1 These Rules apply to:

- **Age Check Certification Scheme Ltd** as Scheme Owner, in respect of all scheme governance obligations set out herein
- **Conformity Assessment Bodies** admitted to operate one or more ACCS schemes, in respect of all CAB obligations set out herein and in ACCS-P01 - Procedure for the Admission, Authorisation and Ongoing Oversight of Conformity Assessment Bodies
- **Authorised Test Laboratories** registered under the scheme, in respect of all ATL obligations set out herein and in ACCS-P02 - Procedure for the Registration, Approval and Ongoing Oversight of Authorised Test Laboratories
- **Certification Clients and applicants** in respect of: their obligations regarding use of the certification mark (Section 4); their rights and obligations in the certification lifecycle including suspension,

withdrawal and termination (Section 8); and their rights in respect of complaints and appeals (Section 9)

- 1.2.2 The technical requirements that Certification Clients and applicants must demonstrate in order to obtain and maintain certification are set out in the applicable scheme-specific document, not in this document.

1.3 Schemes covered by these Rules

- 1.3.1 These General Scheme Rules apply to all certification schemes operated under the Age Check Certification Scheme, currently comprising:

Scheme	Title	Primary Standard(s)	Regulatory Overlay
ACCS 1	Conformity Assessment Requirements for ISO/IEC 27566-1 - Age Assurance Systems - Part 1: Framework	ISO/IEC 27566-1:2025; IEEE 2089.1:2024	Applicable national age assurance regulations
ACCS 2	Technical Requirements for Data Protection and Privacy	UK GDPR; DPA 2018	ICO-approved scheme under Article 42/43 UK GDPR
ACCS 3	Technical Requirements for Age Appropriate Design	UK GDPR; ICO Children's Code	ICO-approved scheme under Article 42/43 UK GDPR

- 1.3.2 A CAB may be admitted to operate any one or more of the above schemes, subject to demonstrating the competence and capability requirements applicable to each scheme as set out in ACCS-P01, and meeting any additional requirements imposed by relevant regulators in respect of specific schemes.
- 1.3.3 An ATL may be registered to provide testing services in support of any scheme for which it meets the applicable competence requirements set out in ACCS-P02.

1.4 Relationship to scheme-specific documents

- 1.4.1 ACCS 0 is the overarching governance document for the scheme family. It takes precedence over scheme-specific documents in all matters of governance, certification process, mark use, complaints, appeals and impartiality. Where a scheme-specific document addresses a matter also addressed in ACCS 0, the provisions of ACCS 0 shall prevail unless the



scheme-specific document expressly and explicitly derogates from ACCS 0 with the written agreement of the Scheme Owner.

1.5 Schemes not covered

- 1.5.1 These Rules do not apply to certification activities carried out by CABs under schemes other than those listed in Section 1.3, even where those schemes relate to age assurance, data protection, or related subject matter. CABs operating other schemes alongside ACCS schemes should maintain clear operational separation between their ACCS activities and any other certification activities.

1.6 Geographic scope

- 1.6.1 The scheme is designed for global application. Where scheme-specific documents or regulatory overlays impose jurisdiction-specific requirements, those requirements apply in addition to these Rules.

2. Normative References

2.1 General

- 2.1.1 The following documents are normative to these General Scheme Rules. For dated references, only the edition cited applies. For undated references, the latest edition (including any amendments) applies.

Governance and Accreditation Standards

- 2.1.2 The following international standards govern the operation of the scheme and the requirements applicable to the Scheme Owner, CABs and ATLs:

Reference	Title	Notes
ISO/IEC 17000	Conformity assessment - Vocabulary and general principles	Undated – see note 1
ISO/IEC 17065	Conformity assessment - Requirements for bodies certifying products, processes and services	Undated – see note 1
ISO/IEC 17067	Conformity assessment - Fundamentals of product certification and guidelines for product certification schemes	Undated – see note 1
EA-1/22 A-AB:2023	EA Procedure and Criteria for the Evaluation of Conformity Assessment Schemes by EA Accreditation Body Members	Dated
Global ACI MLA criteria	Criteria for the evaluation of Conformity Assessment Schemes (currently working to IAF/MD25)	Undated – see note 2
Trade Mark Rules 2008	SI 2008/1797	Applicable to Section 4 of this document

Note 1: References to ISO/IEC 17000, ISO/IEC 17065 and ISO/IEC 17067 are undated. The applicable edition is the current edition recognised for accreditation purposes. The Scheme Owner is aware that ISO/CASCO is currently undertaking a strategic review of these documents. The Scheme Owner should review the impact of any new edition on ACCS 0 and the scheme-specific documents within 6 months of publication and should notify CABs and relevant accreditation bodies of any resulting scheme changes.

Note 2: Global Accreditation Cooperation Incorporated (Global ACI) was established on 1 January 2026, consolidating the former IAF and ILAC structures. The applicable Global ACI criteria document should be the current version recognised by UKAS.

- 
- 2.1.3 Scheme Owner-controlled procedures, scheme-specific documents, forms and templates operating under these General Scheme Rules are identified in Annex A.

2.2 UKGDPR Approved Schemes

- 2.2.1 ACCS 2 and ACCS 3 are approved certification schemes under UK GDPR. They have been approved by the Information Commissioner in the exercise of his powers under Articles 57(1)(n) and 58(3)(f) of the UK General Data Protection Regulation, pursuant to Article 42(5) of the UK General Data Protection Regulation, as it forms part of the law of England and Wales, Scotland and Northern Ireland by virtue of section 3 of the European Union (Withdrawal) Act 2018 and section 205(4) of the Data Protection Act 2018.
- 2.2.2 Certification bodies operating ACCS 2 and ACCS 3 must be accredited in accordance with Article 43(1)(b) of UK GDPR by UKAS (these schemes are only available in the United Kingdom).
- 2.2.3 Any amendments to ACCS 2 or ACCS 3, or to the criteria under which they operate, may be subject to the ICO approval process in addition to the scheme change management provisions of Section 13 of these Rules.

2.3 Legal Provisions

- 2.3.1 The certification activities carried out under this scheme are subject to applicable legal provisions governing age assurance, data protection, and age-restricted goods, content and services. These provisions vary by jurisdiction and are subject to change. The Scheme Owner may maintain a current library of applicable legal provisions and regulatory guidance. CABs and scheme clients are responsible for ensuring their activities comply with applicable legal requirements in all jurisdictions in which they operate.
- 2.3.2 Where a legal or regulatory change affects the requirements of a scheme-specific document, the Scheme Owner may initiate a scheme review in accordance with Section 13 of these Rules.



3. Terms and Definitions

3.1 Interpretation

3.1.1 In this document and in all ACCS implementing procedures:

- **"shall"** indicates a requirement
- **"should"** indicates a recommendation
- **"may"** indicates a permission
- **"can"** indicates a possibility or a capability

GUIDANCE NOTES are shown in italic text. They are intended to assist the reader in understanding provisions and do not add to or reduce requirements.

3.1.2 The interpretation and application of these verbal forms in conformity assessment activities shall be in accordance with ACCS-P07 – Interpretation and Application of Requirements. In particular, the use of “should” shall not be interpreted as meaning that a provision is automatically optional or may be disregarded. Its applicability and the manner in which it is addressed shall be evaluated having regard to the Target of Evaluation and its relevant context of use.

3.1.3 When citing ACCS documents in the body of scheme documents, the convention is:

- For cross-references to sections: ACCS 0, 4.3 or ACCS 1, 6.2 (document identifier, comma, section number)
- For P-documents: ACCS-P01 or ACCS-P01, 4.2 (document identifier, comma, section number where specific)
- For forms: ACCS-P01-F01 (P-document identifier, hyphen, F, form number)
- For templates: ACCS-T03 (T prefix, template number)
- For ISO/IEC standards: ISO/IEC 17065, 7.1 (standard identifier, comma, clause number)
- Internal cross-references within the same document use: Section 4.3 or Table 1 or Annex A

3.1.4 The vocabulary defined in ISO/IEC 17000 applies to this document and is not repeated here. Additional technical vocabulary applicable to individual scheme-specific documents is defined in those documents.

3.2 Parties

3.2.1 Scheme Owner

the organisation responsible for developing, maintaining and governing a certification scheme



Age Check Certification Scheme Ltd (company number 11493870) is the Scheme Owner for all schemes in the ACCS scheme family.

[SOURCE: ISO/IEC 17065, 3.11]

3.2.2 **Conformity Assessment Body (CAB)**

an organisation that performs conformity assessment services, including evaluation, review and certification decision-making, under an ACCS certification scheme

NOTE 1: A CAB must hold current accreditation to ISO/IEC 17065 granted by a national accreditation body that is a signatory to the Global ACI Multilateral Recognition Arrangement.

NOTE 2: A CAB Applicant that does not yet hold ISO/IEC 17065 accreditation covering ACCS schemes may apply for provisional admission under ACCS-P01. Provisional admission enables the CAB Applicant to undertake certification activities under enhanced Scheme Owner oversight while pursuing accreditation. Certificates of Conformity issued under provisional admission should identify the provisional status of the CAB. Full accreditation should be obtained within the period specified in ACCS-P01.

3.2.3 **Participating CAB**

a Conformity Assessment Body that has been admitted by the Scheme Owner to operate one or more ACCS schemes

3.2.4 **Authorised Test Laboratory (ATL)**

a testing organisation registered by the Scheme Owner to provide technical testing services in support of certification activities carried out by a Participating CAB

NOTE: An ATL operates under the direction of the relevant Participating CAB and does not make certification decisions.

3.2.5 **Evaluation Reviewer**

a person appointed by a Participating CAB to conduct the evaluation review of certification activities, who has not been involved in any evaluation activities in respect of the certification activity under review

NOTE: The Evaluation Reviewer should have sufficient technical competence to assess the evaluation record and determine whether the evidence gathered is sufficient to support a certification decision. Competence requirements for Evaluation Reviewers are specified in ACCS-P01.

3.2.6 **Certification Decision Maker**

a person appointed by a Participating CAB who is authorised to make certification decisions on behalf of that CAB, acting within the CAB's management system and under the CAB's full responsibility, who has not participated in the evaluation activities in respect of the certification activity under review

NOTE 1: The Certification Decision Maker should not outsource or delegate the certification decision outside the CAB's management system.



NOTE 2: The Evaluation Reviewer and the Certification Decision Maker may be the same person provided that person meets the independence requirements applicable to both functions.

NOTE 3: Competence requirements for Certification Decision Makers are specified in ACCS-P01.

[SOURCE: ISO/IEC 17065, 7.6]

3.2.7 **Certification Client**

an organisation that has applied for or been granted certification under an ACCS scheme and that is responsible to the Participating CAB for ensuring that the certification requirements are fulfilled

NOTE 1: A Certification Client is distinct from a Participating CAB or registered ATL, both of which have a separate contractual relationship with the Scheme Owner.

NOTE 2: The term "client" as used in ISO/IEC 17065 corresponds to Certification Client in this document.

[SOURCE: ISO/IEC 17065, 3.1]

3.2.8 **Accredited Certification Body**

a Conformity Assessment Body that holds current accreditation to ISO/IEC 17065 granted by a national accreditation body that is a signatory to the Global ACI Multilateral Recognition Arrangement

3.2.9 **Certification Applicant**

an organisation that has submitted an application for certification under an ACCS scheme to a Participating CAB but to whom certification has not yet been granted

NOTE: On the grant of certification, a Certification Applicant becomes a Certification Client.

3.2.10 **CAB Applicant**

an organisation that has applied to the Scheme Owner for admission as a Participating CAB under ACCS-P01 but whose admission has not yet been granted

NOTE 1: On the grant of admission, a CAB Applicant becomes a Participating CAB.

NOTE 2: A CAB Applicant that does not yet hold ISO/IEC 17065 accreditation covering ACCS schemes may apply for provisional admission under ACCS-P01. Provisional admission enables the CAB Applicant to undertake certification activities under enhanced Scheme Owner oversight while pursuing accreditation. Certificates of Conformity issued under provisional admission should identify the provisional status of the CAB. Full accreditation should be obtained within the period specified in ACCS-P01.

3.2.11 **ATL Applicant**

an organisation that has applied to the Scheme Owner for registration as an Authorised Test Laboratory under ACCS-P02 but whose registration has not yet been granted



NOTE: On the grant of registration, an ATL Applicant becomes an Authorised Test Laboratory.

3.2.12

UKAS

the United Kingdom Accreditation Service, the national accreditation body for the United Kingdom, appointed by government

NOTE: UKAS is the accreditation body for Conformity Assessment Bodies operating ACCS schemes in the United Kingdom, including the ICO-approved conformity assessment schemes.

NOTE: UKAS is the home state accreditation body for the Age Check Certification Scheme as the Scheme Owner.

3.2.13

Global ACI Multilateral Recognition Arrangement

the multilateral arrangement administered by Global Accreditation Cooperation Incorporated under which signatory national accreditation bodies mutually recognise each other's accreditation decisions

NOTE 1: Global Accreditation Cooperation Incorporated (Global ACI) was established on 1 January 2026, consolidating the former International Laboratory Accreditation Cooperation (ILAC) and International Accreditation Forum (IAF) and their respective mutual recognition arrangements into a single unified arrangement.

NOTE 2: Global ACI is not itself an accreditation body. It coordinates mutual recognition between national accreditation bodies that are members of the arrangement.

NOTE 3: UKAS is a member of Global ACI.

3.2.14

ICO

the Information Commissioner's Office, the independent supervisory authority established to uphold information rights in the public interest in the United Kingdom

3.2.15

IPO

the Intellectual Property Office, the United Kingdom government body responsible for intellectual property rights including registered trade marks

3.3

Schemes and Certification

3.3.1

Certification Scheme

a set of requirements, rules and procedures established by a scheme owner for the certification of products, processes or services against defined criteria

[SOURCE: ISO/IEC 17065, 3.9]

3.3.2

Scope of Certification

the identification of the products, processes or services for which certification is granted, together with the applicable scheme and the



standard, code or regulations against which conformity is judged, including their date of publication

[SOURCE: ISO/IEC 17065, 3.10]

3.3.3 **Certification Requirement**

a specified requirement that is fulfilled by the client as a condition of establishing and maintaining certification

[SOURCE: ISO/IEC 17065, 3.7]

3.3.4 **Evaluation**

the combination of the selection and determination functions of conformity assessment activities

[SOURCE: ISO/IEC 17065, 3.3]

3.3.5 **Certification Period**

the period during which a Certificate of Conformity is valid, commencing on the date of the certification decision and expiring on the date specified in the certificate, during which the Certification Client is required to participate in surveillance activities and comply with the ongoing requirements of these Rules and the applicable scheme-specific document

3.3.6 **Impartiality**

the presence of objectivity, including freedom from conflict of interest, bias and undue influence

[SOURCE: ISO/IEC 17065, 3.13]

3.3.7 **Consultancy**

the provision of services for the designing, specifying, maintaining, installing or operating of a product, process or service that is within or is a candidate for the scope of certification

NOTE: The boundary between consultancy and permitted gap analysis or pre-assessment advice is addressed in Section 6 of this document.

[SOURCE: ISO/IEC 17065, 3.2]

3.4 **Nonconformity and Continuous Improvement**

3.4.1 **Nonconformity**

non-fulfilment of a requirement

[SOURCE: ISO/IEC 17000, 6.5]

3.4.2 **Major Nonconformity**

a nonconformity that raises significant doubt about the ability of the certified product, process or service to fulfil its certification requirements,



or that represents a failure to implement or maintain a fundamental requirement of the applicable scheme

NOTE 1: A pattern of related minor nonconformities that collectively indicate a systemic failure may be raised as a major nonconformity.

NOTE 2: Closure timescales and the effect of major nonconformities on certification decisions are addressed in Section 8 of this document.

3.4.3 **Minor Nonconformity**

a nonconformity that does not raise significant doubt about the ability of the certified product, process or service to fulfil its certification requirements, but indicates a gap, inconsistency or weakness in the implementation of scheme requirements

NOTE: Closure timescales and the effect of minor nonconformities on certification decisions are addressed in Section 8 of this document.

3.4.4 **Opportunity for Improvement**

an observation identifying a practice, condition or approach that, while not constituting a nonconformity, could be enhanced to increase effectiveness, consistency or confidence in the certified product, process or service

NOTE 1: An opportunity for improvement does not indicate a failure to meet a requirement and does not affect the certification decision.

NOTE 2: Opportunities for improvement are advisory only. A Participating CAB or Client is not obliged to act on an opportunity for improvement, but where possible should address it prior to the next scheduled audit or surveillance activity.

NOTE 3: An opportunity for improvement should not be used as a means of introducing requirements that are not contained in the applicable scheme-specific document.

3.5 **Agreements and Documents**

3.5.1 **CAB Participation Agreement**

a legally enforceable agreement between the Scheme Owner and a Participating CAB under which the CAB is authorised to operate one or more ACCS schemes

NOTE: The CAB Participation Agreement template is a Scheme Owner-controlled document maintained under ACCS-P01-F02.

3.5.2 **ATL Registration Agreement**

a legally enforceable agreement between the Scheme Owner and an Authorised Test Laboratory under which the ATL is authorised to provide testing services under the scheme

NOTE: The ATL Registration Agreement template is a Scheme Owner-controlled document maintained under ACCS-P02-F01.

3.5.3 **Certification Agreement**



a legally enforceable agreement between a Participating CAB and a Client under which certification services are provided

NOTE: The Certification Agreement template is a Scheme Owner-controlled document. The mandatory provisions of the template may not be varied without the written consent of the Scheme Owner.

[SOURCE: ISO/IEC 17065, 4.1.2]

3.6 Financial

3.6.1 Scheme Levy

a fee payable by a Participating CAB or registered Authorised Test Laboratory to the Scheme Owner in respect of each audit day or test day carried out under the scheme

NOTE: The Scheme Levy rate and calculation methodology are set out in ACCS-P04.

3.7 Regulatory

3.7.1 UK GDPR

the General Data Protection Regulation (EU) 2016/679 as it forms part of the law of England and Wales, Scotland and Northern Ireland by virtue of section 3 of the European Union (Withdrawal) Act 2018 and section 205(4) of the Data Protection Act 2018



4. Regulations Governing the Use of the Certification Mark

4.1 General

4.1.1 This section is for compliance with the Trade Mark Registrar's Regulations governing the use of the ACCS Certification Mark. These Scheme Rules also comply with the requirements of the Trade Mark Rules 2008 and have been assessed by the Intellectual Property Office. The condition of use of these marks by certified clients is given below. The format and permitted use of the Certification Mark are specified in ACCS-P03.

4.1.2 The ACCS Certification Mark UK 3467707 for the mark "Age Check Certified Scheme" is approved by the Intellectual Property Office (IPO).

4.2 Persons authorised to use the mark

4.2.1 The persons authorised to use the mark are any individuals or companies having achieved a certificate of conformity and demonstrating ongoing compliance with the Scheme Rules that are:

- Proof-of-Age ID Providers
- Age Assurance Providers
- Intermediaries
- Relying Parties that rely on results of an age check
- Information Society Services
- Participant CABs
- Registered ATLs

4.2.2 A Participating CAB is authorised to display the Certification Mark on Certificates of Conformity and Schedules of Certification issued to Scheme Clients under this scheme, solely for the purpose of indicating that the certified product, process or service has been assessed and certified in accordance with the applicable scheme requirements. A Participating CAB shall not display the Certification Mark in any manner that implies the CAB itself holds certification under the scheme. The conditions governing CAB use of the Certification Mark are set out in ACCS-P03 and the CAB Participation Agreement (ACCS-P01).

4.2.3 An Authorised Test Laboratory is not authorised to display the Certification Mark on any client reports. An ATL may state factually in its marketing and communications that it is registered as an Authorised Test Laboratory under the Age Check Certification Scheme. The conditions governing ATL



references to the scheme are set out in ACCS-P03 and the ATL Registration Agreement (ACCS-P02).

4.3 Characteristics being certified

- 4.3.1 Use of the mark certifies that the products, processes and systems of the certified provider can, within the scope of their certification, meet the relevant requirements of appropriate standards or regulations regarding age assurance and the protection of children from harm from access to age restricted content, goods or services.

4.4 How the certification body tests those characteristics

- 4.4.1 The certification body will test the characteristics by performing initial type testing in relation to the relevant individual criteria, covering the age assurance service provider type to be certified.
- 4.4.2 Further details of this can be found at Section 6 of these General Scheme Rules.
- 4.4.3 How the certification body supervises use of the mark:
- Following an initial audit and issuance of a certificate of conformity
 - Regular monitoring based on a randomised sampling approach
 - Accelerated sampling because of persistent non-conformances
 - Recertification at defined intervals not exceeding three years

4.5 Fees to be paid

- 4.5.1 Details on the fees can be found at Section 14 of these General Scheme Rules.

4.6 Procedure for resolving disputes

- 4.6.1 Any initial appeals specifically dealing with the refusal of an authorised user to become part of the certification scheme can be found at Section 9 of these General Scheme Rules.

4.7 Condition of the Regulations

- 4.7.1 It is a condition of use that the mark shall not be used without indicating that it is a Certification Mark.



4.8 Amendment of the regulation not without the consent of the register

- 4.8.1 An amendment of this Section 4 of the General Scheme Rules & Procedures governing the use of the registered certification mark shall not take effect unless and until the amended regulations are filed with the Trade Marks Registrar and accepted. Any significant amendments to these scheme rules may be subject to stakeholder review and input and shall be notified to UKAS in accordance with Section 13.



5. Competence of Personnel

5.1 General Principle

5.1.1 The integrity of certification under ACCS schemes depends on the competence of the personnel who design, operate, evaluate, review and decide certification activities. The Scheme Owner, all Participating CABs and all registered ATLs shall ensure that personnel performing functions under these Rules possess the competence necessary for those functions and maintain that competence throughout their involvement in scheme activities.

5.1.2 Competence comprises:

- a) **education and qualifications** - relevant formal qualifications, professional credentials or equivalent learning
- b) **knowledge** - understanding of the applicable scheme requirements, normative standards, regulatory framework and evaluation methodology relevant to the functions performed
- c) **skills** - the practical ability to apply that knowledge in the performance of evaluation, review, decision and oversight activities
- d) **experience** - demonstrated prior involvement in relevant certification, evaluation, technical assessment or regulatory activities

5.1.3 Competence assessments shall be documented and made available to the Scheme Owner on request as part of the Participating CAB's or ATL's oversight obligations under ACCS-P01 and ACCS-P02 respectively.

GUIDANCE NOTE: Competence requirements under this section are in addition to, not instead of, the competence requirements applicable to Participating CABs under ISO/IEC 17065 and their UKAS accreditation. Where ISO/IEC 17065 or UKAS accreditation requirements specify competence standards for particular functions, those standards apply alongside the scheme-specific requirements of this section.

5.2 Competence of Scheme Owner Personnel

5.2.1 The Scheme Owner shall maintain sufficient competence among its personnel (or seconded personnel from any Participating CAB or Registered ATL) to discharge its scheme governance obligations, including:

- a) **Scheme administration** - personnel responsible for managing the scheme registry, processing levy notifications, administering CAB and ATL admission and oversight, and maintaining scheme documentation should have sufficient knowledge of scheme governance requirements, certification process architecture and applicable legal and regulatory obligations

- 
- d) auditing skills - including evidence gathering, interviewing, sampling, report writing and nonconformity categorisation
 - e) experience of conducting conformity assessment evaluations in a relevant technical domain

5.3.3 The Lead Auditor shall not make the certification decision in respect of any evaluation activity they have led.

Audit Team Members

5.3.4 Members of the audit team supporting the Lead Auditor shall have competence appropriate to the evaluation activities they are assigned to conduct. The Lead Auditor is responsible for ensuring that the audit team as a whole has the competence required for the full scope of the evaluation.

Evaluation Reviewer

5.3.5 An Evaluation Reviewer is responsible for conducting the Stage One Quality Assurance Review (See Section 6.15) and the Evaluation Review (See Section 6.18) before the certification decision. The Evaluation Reviewer shall have:

- a) sufficient knowledge of ISO/IEC 17065 and the applicable ACCS scheme-specific document to assess whether evaluation activities have been conducted in accordance with the scheme requirements
- b) sufficient technical competence to assess the completeness and sufficiency of the evaluation record, including the audit report and test report
- c) sufficient experience of evaluation review activities to identify gaps, inconsistencies and weaknesses in the evaluation record
- d) independence from the evaluation activities under review - the Evaluation Reviewer shall not have been involved in any evaluation activities in respect of the certification activity being reviewed

Certification Decision Maker

5.3.6 The Certification Decision Maker is responsible for making the certification decision following the Evaluation Review. The Certification Decision Maker shall have:

- a) met the competence requirements applicable to the Evaluation Reviewer under 5.3.5
- b) sufficient authority within the Participating CAB's management system to make and be accountable for certification decisions
- c) sufficient knowledge of the certification decision framework under Section 6.19 to apply the correct decision type in each case

- 
- d) notify the Scheme Owner of the engagement of subcontractors for scheme functions, in accordance with ACCS-P01 or ACCS-P02 as applicable
 - e) retain full responsibility for the quality and correctness of all work performed by subcontractors

5.6.2 A subcontractor performing evaluation, review or testing functions under an ACCS scheme shall be subject to the same independence and impartiality requirements as the Participating CAB or ATL that engaged them.

GUIDANCE NOTE: The use of subcontractors does not reduce the Participating CAB's or ATL's accountability for the work performed. UKAS will assess the CAB's subcontractor management arrangements as part of the ISO/IEC 17065 accreditation. The Scheme Owner's oversight function under ACCS-P01 and ACCS-P02 includes the right to request information about subcontractor arrangements and to raise concerns where subcontractor competence or independence appears inadequate.

5.7 Scheme Owner Training and Competence Support

5.7.1 The Scheme Owner may make available to Participating CABs and registered ATLs training and competence support materials to assist in developing and maintaining the competence of their personnel in relation to ACCS schemes. These materials may include:

- a) **Scheme induction training** - introductory training on the scheme governance framework, certification process architecture, scheme-specific technical requirements and applicable regulatory obligations, available to new CAB and ATL personnel before they perform scheme functions
- b) **Technical guidance and how-to materials** - practical guidance on the application of scheme requirements, evaluation methodology and evidence expectations, maintained as controlled documents by the Scheme Owner and made available through the Scheme Owner's document portal
- c) **Reference templates and worked examples** - the Scheme Owner's reference templates under Section 6.4, together with worked examples and annotation where available, illustrating the application of scheme requirements in practice
- d) **Scheme update briefings** - briefings to Participating CABs and registered ATLs following any scheme change, explaining the nature of the change and its implications for evaluation activities
- e) **Competency assessment tools** - where developed by the Scheme Owner, tools to assist Participating CABs and registered ATLs in assessing the competence of their personnel against the scheme-specific requirements of this section

5.7.2

The Scheme Owner's training and competence support materials are developed and maintained as part of the Scheme Owner's core governance function, funded through the Scheme Levy (See ACCS-P04). Access to these materials is a benefit of participation in the scheme for Participating CABs and registered ATLs.

GUIDANCE NOTE: The Scheme Owner's training and competence support materials are intended to complement - not replace - the Participating CAB's and ATL's own competence development obligations. They provide scheme-specific content that the CAB or ATL cannot readily develop independently, particularly in relation to new schemes, scheme changes and emerging technical developments in age assurance. The availability of these materials is a material benefit of scheme participation and should be considered by prospective CABs and ATLs when evaluating the value of scheme membership relative to the Scheme Levy.

Training delivered by the Scheme Owner does not itself certify competence for the purposes of this section - competence assessment remains the responsibility of the Participating CAB or ATL. However, completion of Scheme Owner training may be taken into account as part of a CAB's or ATL's competence assessment process.



6. Certification Process

6.1 Conformity Assessment Bodies

6.1.1 The Scheme Owner may admit Conformity Assessment Bodies to operate one or more ACCS schemes in accordance with ACCS-P01. Full admission requires the CAB to hold current accreditation to ISO/IEC 17065 granted by a national accreditation body that is a member of the Global ACI Multilateral Recognition Arrangement. Only Participating CABs holding a current CAB Participation Agreement may undertake certification activities and issue Certificates of Conformity under the scheme.

6.1.2 A current register of Participating CABs is maintained on the Scheme website.

6.2 Authorised Test Laboratories

6.2.1 The Scheme Owner may register Authorised Test Laboratories to provide technical testing services in support of certification activities carried out by Participating CABs, in accordance with ACCS-P02. Registration requires the ATL to demonstrate competence in the applicable testing methodologies and to hold a current ATL Registration Agreement with the Scheme Owner.

6.2.2 An ATL operates under the direction of the relevant Participating CAB and does not make certification decisions. A Participating CAB retains full responsibility for the quality and completeness of any testing activities outsourced to a registered ATL.

6.2.3 A current register of registered ATLs is maintained on the Scheme website.

6.3 Certification Process Architecture

6.3.1 The Scheme Owner maintains a common certification process architecture defining the functional stages of the certification lifecycle applicable across all ACCS schemes. This architecture ensures that all certification activities (regardless of which Participating CAB undertakes them) follow a consistent sequence of functions, supporting reproducibility and comparability of certification outcomes.

6.3.2 The certification lifecycle comprises the following stages and functions:

Stage	Functions
Initial Certification	Application review; initial call and scoping; Stage One audit planning; Stage One testing (where required); Stage One audit; Stage One quality assurance review; Stage Two audit planning; Stage Two testing (where required); Stage Two audit; evaluation review; post-evaluation certification
During Certification	Client review; surveillance audit planning; surveillance testing (where required); surveillance audit; surveillance evaluation review; post-surveillance certification; recertification preparation; recertification
Extension of Scope	Extension application review; extension scoping; extension testing (where required); extension audit; extension evaluation review; post-extension certification
Changes, Issues and Termination	Handling complaints and nonconformities during certification; minded to take action; administrative amendments to certification; changes affecting certification arising other than from client request; termination, reduction, suspension or withdrawal of certification; change of legal entity

6.3.3 The Scheme Owner assigns a reference identifier to each function within the architecture. Reference identifiers are fixed to their function and should not be reassigned to a different function within any scheme operating under ACCS 0. Where a function is not applicable to a particular scheme, the reference is designated not applicable for that scheme but is not reassigned to an unrelated function.

6.4 Scheme Owner Reference Templates

6.4.1 For each ACCS scheme, the Scheme Owner maintains a suite of controlled reference templates implementing the certification process architecture for that scheme. These templates are available to Participating CABs and registered ATLs through the Scheme Owner's document portal.

6.4.2 Use of the Scheme Owner's reference templates is not mandatory. A Participating CAB may use its own templates and document management systems, provided:

- a) they meet the requirements of its ISO/IEC 17065 accreditation (for CABs) and the scheme-specific requirements of the applicable ACCS scheme-specific document

- 
- b) its templates address all functional stages of the certification process architecture applicable to the relevant scheme
 - c) its templates capture all information required by the applicable scheme-specific document and these Rules
 - d) its completed certification records can be identified by certification lifecycle stage, client, scheme, date and responsible auditor
 - e) the templates used are available for review by the Scheme Owner on request

6.4.3 The current suite of Scheme Owner reference templates for each active ACCS scheme is set out in Annex A to these Rules.

GUIDANCE NOTE: The Scheme Owner's reference templates have been designed to implement the requirements of the applicable ACCS scheme-specific document and these Rules. Participating CABs that adopt them benefit from the Scheme Owner's investment in ensuring template content reflects current scheme requirements. Participating CABs using their own templates are responsible for ensuring those templates remain current following any scheme changes.

6.5 Applications

6.5.1 A Certification Applicant seeking certification under an ACCS scheme may submit an application to a Participating CAB. The application should contain sufficient information to enable the CAB to:

- a) assess the proposed scope of certification and confirm it falls within an ACCS scheme for which the CAB is admitted
- b) confirm its competence and capability to undertake the certification activity
- c) identify the applicable scheme-specific requirements
- d) determine the audit effort in accordance with ACCS-P04

6.5.2 The minimum application content requirements are specified in the applicable scheme-specific document.

6.6 Application Review

6.6.1 A Participating CAB should conduct an application review within 7 working days of receiving a completed application. The application review shall:

- a) confirm the proposed scope of certification and that it falls within an ACCS scheme for which the CAB is admitted
- b) confirm the CAB's competence and capability to undertake the certification activity

- c) assess whether the Certification Applicant is a suitable candidate for certification, having regard to the criteria specified in the applicable scheme-specific document
- d) identify any pre-assessment requirements
- e) determine the audit effort in accordance with ACCS-P04
- f) provide the Certification Applicant with a quotation for certification services

6.6.2 Following the application review, the Participating CAB should notify the Certification Applicant in writing of the outcome. Where the CAB determines that it is unable to proceed with the application, it shall provide the Certification Applicant with written reasons. The minimum requirements for the application review are specified in the applicable scheme-specific document.

6.7 Novel Applications

6.7.1 Where a Participating CAB receives an application for certification in respect of a type of product, process or service, or technical area not previously evaluated under the scheme, the Participating CAB should notify the Scheme Owner before proceeding.

- 6.7.2 On receiving such notification, the Scheme Owner may:
- a) consult with other Participating CABs and registered ATLs (without revealing the certification applicant's identity) as appropriate to share relevant experience and technical knowledge
 - b) consider whether any scheme-specific guidance is required to support consistent evaluation of the novel application across the scheme
 - c) consider whether the novel application indicates a need for a scheme review or scheme development activity in accordance with Section 13
 - d) provide such guidance, interpretive notes or technical support to the notifying CAB as the Scheme Owner considers appropriate

6.7.3 The Scheme Owner should communicate any guidance arising from a novel application to all Participating CABs and registered ATLs to support consistency of approach across the scheme

GUIDANCE NOTE: A novel application may arise from the emergence of new age assurance technologies, new contexts of use, new jurisdictions, or new regulatory frameworks. The Scheme Owner's role in this process is supportive and advisory - it does not make the certification decision, which remains the sole responsibility of the Participating CAB. The CAB's own ISO/IEC 17065 accreditation governs its internal processes for assessing competence to undertake novel certification activities. Any consultation with other

Participating CABs or ATLs under (a) above should be conducted on an anonymised basis and the identity of the Certification Applicant should not be disclosed.

6.8 Sanctions, PEP and Adverse Media Screening

Scheme requirements for Sanctions

- 6.8.1 A Participating CAB shall maintain and operate a documented policy for screening Certification Applicants and Certification Clients against applicable sanctions designations, Politically Exposed Person (PEP) lists, regulatory restrictions and adverse media before accepting an application for certification and, where appropriate, throughout the period of certification.
- 6.8.2 The screening policy shall, as a minimum, address:
- a) **Sanctions** - screening of the applicant legal entity, its Ultimate Beneficial Owners and directors against applicable UK, EU and US sanctions lists, and any other national or international sanctions sources appropriate to the applicant's jurisdiction and risk profile
 - b) **PEP screening** - identification of any PEP among the applicant's Ultimate Beneficial Owners and directors, with application of Enhanced Due Diligence where a PEP is identified
 - c) **Regulatory restrictions** - assessment of whether any known regulatory, legal or professional restriction would prevent or materially affect the provision of certification services
 - d) **Adverse media** - proportionate assessment of publicly available information that may indicate integrity, reputational or impartiality risks associated with the applicant
 - e) **Escalation and decision** - a documented escalation and decision process for cases where a potential match, PEP, restriction or adverse finding is identified, with final decisions requiring appropriate senior authorisation

Decision principles

- 6.8.3 Identification of a PEP does not automatically prevent the provision of certification services. It requires the application of Enhanced Due Diligence and an appropriately authorised decision.
- 6.8.4 A confirmed sanctions designation or applicable legal prohibition shall prevent the provision of certification services where doing so would breach that prohibition. The Scheme Owner recommends taking specialist legal advice before contemplating proceeding with a person or organisation with a confirmed sanctions designation or applicable legal prohibition.

- 
- 6.8.5 Adverse media findings shall be assessed proportionately, having regard to the reliability and provenance of the information, the seriousness and relevance of the matter, and any remedial action taken. An applicant should not be declined solely on the basis of unverified allegations or AI-generated search results. The Participating CAB shall have regard to the overriding obligation not to bring the Scheme into disrepute.

Separation from certification decision

- 6.8.6 Screening under this clause concerns whether the Participating CAB may appropriately enter into or continue a client relationship. It is entirely separate from the technical assessment of whether a Certification Applicant satisfies the requirements of the applicable scheme-specific document. Approval to proceed following screening shall not imply that certification will be granted, reduce the evidence required to demonstrate conformity or otherwise compromise the independence or impartiality of the certification decision.
- 6.8.7 A Certification Applicant should not be declined for certification solely because its business activities are subject to criticism or controversy or because the activities are inconsistent with the personal views of personnel involved in the certification process. Any decision not to provide certification services should be based on legitimate legal, regulatory, integrity, impartiality or risk grounds.
- 6.8.8 In exercising any discretion under this clause, a Participating CAB should have regard to its obligations under ISO/IEC 17065, including the requirement that certification services be accessible to all applicants whose activities fall within the scheme scope and that policies and procedures be non-discriminatory and not used to impede or inhibit access beyond what is legitimately required. See ISO/IEC 17065, 4.1.1 and 4.2.

Records

- 6.8.9 The Participating CAB shall maintain records sufficient to demonstrate that screening has been completed for each Certification Applicant and Certification Client in accordance with its screening policy. Records shall be retained in accordance with Section 10 of these Rules and the Participating CAB's own information governance procedures.

Ongoing monitoring

- 6.8.10 The Participating CAB shall maintain ongoing monitoring arrangements for Certification Clients throughout the period of certification, where supported by the screening service in use, to identify material changes including new



sanctions designations, changes in PEP status, significant adverse media and relevant regulatory developments.

GUIDANCE NOTE: The Scheme Owner maintains a reference screening policy and operational checklist available to Participating CABs and registered ATLs through the Scheme Owner's document portal. Participating CABs may adopt these reference documents within their own QMS or maintain equivalent arrangements that satisfy the requirements of this clause. The adequacy of a Participating CAB's screening arrangements will be assessed as part of the admission process under ACCS-P01 and reviewed as part of ongoing oversight.

6.9 Initial Call and Scoping

6.9.1 Following completion of the application review, a Participating CAB may conduct an initial call and scoping exercise with the Certification Applicant. The initial call and scoping exercise should:

- a) define and confirm the scope of certification, including any scope boundaries, exclusions and contexts of use
- b) review relevant documentation provided by the Certification Applicant in support of the application
- c) confirm or revise the audit effort calculation in accordance with ACCS-P04 in light of the scoping information obtained
- d) confirm readiness to proceed to Stage One planning or identify any matters to be resolved before Stage One can commence

6.9.2 The outcome of the initial call and scoping exercise should be documented. Where the audit effort calculation is revised following scoping, the revised calculation shall be agreed with the Certification Applicant before evaluation activities commence.

6.9.3 Following confirmation of the audit effort calculation, the Participating CAB shall notify the Scheme Owner of the confirmed audit day calculation in accordance with ACCS-P04. This notification (and any subsequent amendment to it) forms the basis for the Scheme Levy applicable to the certification activity.

6.10 Certification Agreement

6.10.1 Prior to the commencement of any pre-assessment or evaluation activities, a Participating CAB shall ensure that a legally enforceable Certification Agreement is in place with the Certification Applicant.



Mandatory ISO/IEC 17065 provisions

- 6.10.2 The Certification Agreement shall include all provisions required by ISO/IEC 17065, including, but not limited to, provisions relating to:
- a) the Certification Applicant's obligations to provide access and information to enable evaluation activities to be conducted, including access to facilities, systems, records, data centres and cloud-based infrastructure relevant to the scope of certification, whether located on the Certification Applicant's own premises or operated by a third party on their behalf
 - b) confidentiality obligations binding on both parties in respect of information obtained during certification activities
 - c) the Certification Applicant's right to appeal certification decisions in accordance with Section 9.6
 - d) liability arrangements between the Participating CAB and the Certification Applicant

Mandatory scheme provisions

- 6.10.3 In addition to the ISO/IEC 17065 provisions, the Certification Agreement shall include the following mandatory scheme provisions, which may not be varied without the written consent of the Scheme Owner:
- a) the obligation of the Certification Applicant to comply with the applicable scheme-specific document and these Rules as a condition of obtaining and maintaining certification
 - b) the obligation of the Certification Applicant to notify the Participating CAB of any changes affecting certification in accordance with Section 8.1
 - c) the obligation of the Certification Applicant to comply with the mark use requirements set out in Section 4 and ACCS-P03, including the obligation to cease use of the certification mark on suspension, reduction or withdrawal of certification within the timescales specified in ACCS-P03
 - d) consent to the sharing of information between the Participating CAB and the Scheme Owner for the purposes of scheme oversight, levy administration and public registry maintenance, subject to the confidentiality provisions of Section 12
 - e) the obligation of the Certification Applicant to notify the Participating CAB of any regulatory investigation, enforcement action or legal proceedings that may affect the certified scope
 - f) where the applicable scheme-specific document operates as a regulatory approved scheme, any additional mandatory provisions required by the relevant regulatory authority

GUIDANCE NOTE: For certification activities under ACCS 2 and ACCS 3, the ICO's certification framework specifies mandatory contract provisions that should be included in

the Certification Agreement. These provisions are set out in the applicable scheme-specific document and may not be varied.

Commercial provisions

- 6.10.4 The Certification Agreement may include such additional commercial terms as the Participating CAB and the Certification Applicant agree between themselves, including terms relating to pricing, payment, timescales, professional indemnity, liability limitations and governing law. Such commercial terms are a matter for the parties and are not governed by these Rules, provided they do not conflict with the mandatory scheme provisions above.

Template and signing

- 6.10.5 The Certification Agreement may be in the form of the template issued and controlled by the Scheme Owner. The mandatory scheme provisions specified in 6.10.3 above may not be varied without the written consent of the Scheme Owner. Commercial provisions may be added to or varied within the template at the discretion of the Participating CAB. The current version of the Certification Agreement template is maintained under ACCS-P01.

6.11 Pre-Assessment and Permitted Advisory Activities

Permitted activities

- 6.11.1 At the request of a Certification Applicant, a Participating CAB may undertake pre-assessment and advisory activities prior to the commencement of Stage One evaluation. The following activities are expressly permitted and do not constitute Consultancy:
- a) **Explaining scheme requirements** - providing explanations of the requirements of the applicable scheme-specific document and these Rules, whether in written form, by presentation, or through training or awareness sessions open to the applicant's personnel
 - b) **Gap identification** - identifying, at a high level, areas where the applicant's existing documented arrangements may not yet demonstrate conformity with scheme requirements, without recommending specific solutions
 - c) **Evidence guidance** - advising on the types of evidence the CAB would expect to see during evaluation, without prescribing how that evidence should be created or structured
 - d) **Document review** - reviewing documents provided by the applicant and indicating whether they appear to address the relevant scheme



requirements, without drafting, amending or recommending specific wording

- e) **Readiness assessment** - conducting a structured review of the applicant's overall readiness for Stage One evaluation, resulting in a written findings report identifying areas of apparent conformity and apparent gap
- f) **Answering technical questions** - responding to specific questions from the applicant about whether a described approach would satisfy a stated scheme requirement, based on the information provided

GUIDANCE NOTE: Permitted activities under this clause help applicants understand what is required and assess their own readiness. They do not involve the CAB taking responsibility for the applicant's compliance or doing the applicant's work for them.

Prohibited activities - Consultancy

- 6.11.2 A Participating CAB shall not provide Consultancy (See 3.3.6) to a Certification Applicant or Certification Client. The following activities constitute Consultancy and are prohibited:
- a) designing, specifying, developing or implementing systems, processes, policies or procedures for the applicant that are within or are candidates for the scope of certification
 - b) drafting or substantially rewriting documents that form part of the applicant's compliance evidence
 - c) making specific recommendations about which third-party products, services or suppliers the applicant should use to achieve conformity
 - d) acting as an internal auditor for the applicant in respect of matters within the scope of certification
 - e) providing project management or implementation oversight services for the applicant's compliance programme

GUIDANCE NOTE: The distinction between permitted advisory activity and prohibited consultancy is this: a CAB may tell an applicant what the requirements are and what the gap looks like - it should not tell the applicant how to close the gap or do so on their behalf.

Recommending third parties

- 6.11.3 Where a Certification Applicant requests a recommendation for consultancy assistance, a Participating CAB may provide general information about the types of expertise relevant to scheme preparation. A Participating CAB should not recommend a specific consultancy organisation or individual where it has a commercial, financial or personal relationship with that organisation or individual. Any recommendation should be accompanied by a declaration that the CAB has no relevant commercial relationship with the recommended party.



Effect on subsequent evaluation

- 6.11.4 The provision of permitted advisory activities under 6.11.1 does not prevent the same Participating CAB from subsequently conducting the Stage One and Stage Two evaluation of the applicant. The same individual auditor who conducted a pre-assessment may conduct the subsequent evaluation, provided:
- a) the pre-assessment was limited to the activities described in 6.11.1
 - b) the auditor declares any pre-assessment activities undertaken in the evaluation record
- 6.11.5 Where prohibited consultancy has been provided, the Participating CAB shall not conduct the subsequent certification evaluation until at least two years has elapsed without any consultancy provided. This prohibition applies to the CAB as a whole, not merely to the individual who provided the consultancy.

GUIDANCE NOTE: The rationale for 6.11.4 is that permitted advisory activities help the applicant understand the requirements - they do not compromise the auditor's objectivity in assessing whether those requirements have been met. Prohibited consultancy does compromise objectivity because the CAB would in effect be auditing its own work.

Fees for pre-assessment

- 6.11.6 A Participating CAB may charge a fee for pre-assessment activities conducted under 6.11.1. Pre-assessment fees are a commercial matter between the Participating CAB and the Certification Applicant. Pre-assessment activity does not form part of the audit effort calculation for the purposes of the Scheme Levy under ACCS-P04.

6.12 Evaluation Planning

- 6.12.1 A Participating CAB shall ensure that each evaluation activity is planned before it commences. The evaluation plan may take the form of a structured working document that is developed and refined as planning progresses. The plan need not be finalised as a single document at a single point in time, provided that the matters listed are addressed before the relevant evaluation activity is undertaken.
- 6.12.2 The evaluation plan should be shared with the Certification Applicant or Certification Client to enable logistical arrangements to be agreed. Agreement on logistics should not extend to the Certification Applicant or Certification Client determining or limiting the evaluation methodology, scope or criteria.
- 6.12.3 Where evaluation activities are materially revised following commencement, the evaluation plan shall be updated to reflect the revised



activities and the Certification Applicant or Certification Client notified accordingly.

Contents of Evaluation Planning

- 6.12.4 The evaluation planning documentation shall include, as a minimum, the following:
- a) the scope and objectives of the evaluation activity
 - b) the evaluation team - identifying the lead auditor, any additional auditors, any technical specialists, and any registered ATL involved in testing activities, together with their respective roles and responsibilities
 - c) the evaluation methodology - identifying the evaluation techniques to be used, including document review, interview, observation, testing and sampling as applicable
 - d) the timetable - setting out the planned dates, duration and sequence of evaluation activities, consistent with the confirmed audit effort calculation under ACCS-P04
 - e) the scheme requirements and criteria against which conformity will be assessed
 - f) the evidence and documentation expected from the Certification Applicant or Certification Client prior to and during the evaluation
 - g) any known limitations, assumptions or constraints relevant to the evaluation

Test Planning

- 6.12.5 Where the evaluation includes testing of a product, process or service - whether conducted by the Participating CAB itself or by a registered ATL - a separate test plan should be prepared before testing commences. The test plan shall form part of the evaluation record and shall address, as a minimum:
- a) the product, process or service to be tested and the version or configuration under test
 - b) the testing objectives and the scheme requirements against which testing will be conducted
 - c) the test methodology, including the testing standards and methods to be applied
 - d) the test environment, equipment and conditions
 - e) the test population and sampling approach, where applicable
 - f) the acceptance criteria to be applied to test results
 - g) the identity of the organisation and personnel conducting the testing - specifying whether testing will be conducted by the Participating CAB or by a registered ATL engaged for the purpose

- 
- 6.12.6 The test plan shall be agreed between the Participating CAB and the registered ATL before testing commences, where an ATL separate from the CAB is engaged.

GUIDANCE NOTE: The test plan is the agreement between the CAB and the ATL - or between the CAB's audit function and its testing function where both sit within the same organisation - about what will be tested, how, and against what criteria. Separating the test plan from the audit plan ensures that testing objectives are clearly defined before testing begins and that test results can be properly evaluated in the context of the audit.

ATL - same organisation as CAB

- 6.12.7 Where the Participating CAB and the registered ATL are the same organisation, the CAB shall ensure that:
- a) the personnel conducting testing activities are functionally separate from the personnel making the certification decision
 - b) the test plan and test report are maintained as distinct documents from the audit plan and audit report
 - c) the dual role of the organisation is declared in the evaluation record

GUIDANCE NOTE: A CAB that operates its own testing capability - for example maintaining a dedicated test studio or laboratory - may act as both CAB and ATL for the same certification activity, provided appropriate internal separation is maintained. The requirement for functional separation does not require separate legal entities; it requires that the testing function and the certification decision function are carried out by different individuals acting in their respective capacities.

ATL - separate organisation

- 6.12.8 Where a registered ATL separate from the Participating CAB is engaged for testing activities:
- a) the Participating CAB shall request the ATL to confirm its current registration status with the Scheme Owner before engaging it for testing activities
 - b) the Participating CAB shall ensure that the ATL operates under a written agreement covering the scope of testing, confidentiality obligations and the requirement to produce a test report in a form suitable for inclusion in the evaluation record
 - c) the Participating CAB retains full responsibility for the quality, completeness and accuracy of all testing activities conducted by the ATL and for the integration of test results into the evaluation record.

GUIDANCE NOTE: Confirmation of ATL registration status protects the CAB - engaging an unregistered testing organisation would create a scheme nonconformity regardless of the quality of the testing conducted. The Scheme Owner's register of registered ATLs is maintained on the scheme website.



6.13 Recognition of Prior Conformity Assessment Results

- 6.13.1 A Participating CAB can take into consideration independently assessed evidence of conformity provided by the Client where that evidence has been issued by a conformity assessment body accredited by a member of the Global ACI Multilateral Recognition Arrangement.
- 6.13.2 Such evidence should be assessed against the following criteria before being accepted as relevant to the certification evaluation:
- a) **Relevance** - whether the prior certification addresses requirements that are also within the scope of the ACCS certification being sought
 - b) **Currency** - whether the prior certification is current and has not lapsed, been suspended or been withdrawn
 - c) **Scope** - whether the scope of the prior certification is sufficiently aligned with the object of ACCS certification to justify reduced evaluation effort in the relevant area
 - d) **Integrity** - whether the prior certification was issued by an accredited body and whether the certificate can be independently verified
- 6.13.3 Prior certification evidence should not be automatically accepted as demonstrating conformity with ACCS scheme requirements. Its acceptance should be a documented decision by the lead auditor, with the rationale recorded in the evaluation record.
- 6.13.4 The applicable scheme-specific document identifies the certifications and accreditations that are relevant to each scheme, together with the areas of scheme requirements to which they may apply. The effect of prior certification evidence on audit effort calculation is governed by ACCS-P04.
- GUIDANCE NOTE: The acceptance of prior certification evidence is a judgement, not a mechanical process. An auditor reviewing ISO 27001 certification should consider whether the scope of that certification covers the specific systems, processes and controls relevant to the ACCS certification being sought - not merely whether the certificate exists.*
- 6.13.5 Where prior conformity assessment results are considered, the Participating CAB may apply the following four-tier weighting framework. The scheme-specific document identifies the types of evidence applicable to each scheme and any additional scheme-specific weighting considerations.
- a) Evidence from a CAB accredited by a Global ACI member body, within the scope of that accreditation - substantial weight
 - b) Evidence from a CAB accredited by a Global ACI member body, outside the scope of that accreditation - significant weight, with additional verification of competence
 - c) Evidence from a CAB not accredited by a Global ACI member body - limited weight; full audit or test records required

- d) Evidence from second-party or other external sources - very limited weight; to be considered only in conjunction with other evidence

6.13.6 Recognition of prior evidence does not constitute automatic conformity. All evidence should be assessed against the specific requirements of the relevant scheme-specific document and the applicable normative standards.

6.14 Stage One Evaluation

6.14.1 Stage One evaluation is a documentation and readiness assessment. Its purpose is to establish whether the Certification Applicant has assembled sufficient documented evidence to demonstrate, at least in apparent terms, that it may be ready for Stage Two technical evaluation.

6.14.2 Stage One evaluation does not determine conformity with the requirements of the applicable scheme-specific document. Findings made at Stage One are observations about the apparent completeness, relevance and adequacy of the documentation and evidence supplied - they are not confirmed nonconformities. Conformity is determined at Stage Two through technical evaluation, testing and objective evidence review.

6.14.3 A Certification Applicant should not be assessed as conforming or non-conforming with scheme requirements solely on the basis of Stage One findings.

GUIDANCE NOTE: The distinction between Stage One and Stage Two reflects the nature of product certification under ISO/IEC 17065. Stage One asks whether the documentation supplied appears to address the requirements. Stage Two asks whether the product, process or service actually conforms. Both are necessary - a well-documented system that does not perform as documented is not certifiable; a well-performing system that cannot be evidenced through documentation presents the same problem.

Stage One findings

6.14.4 The Participating CAB shall document all Stage One findings. Stage One findings may be categorised as:

- a) **Ready to proceed**- the documentation and evidence supplied appears to address the relevant requirement adequately for the purposes of Stage One. This does not constitute a determination of conformity
- b) **Conditional – Proceed subject to conditions** - the documentation or evidence required to demonstrate conformity with a relevant requirement has not been supplied or does not appear to address the requirement. The Certification Applicant should be invited to supply or address the missing evidence before or during Stage Two
- c) **Not ready to proceed** – the documentation and evidence supplied does not appear to address the relevant requirement adequately for the



purposes of Stage One. Documentation and evidence will need to be supplied before moving on to Stage 2.

- d) **Observation** - a matter noted by the auditor that does not constitute a documentary gap but may be relevant to Stage Two planning or to the Certification Applicant's preparation

- 6.14.5 Documentary gaps identified at Stage One may remain open at the commencement of Stage Two, provided:
- a) the Certification Applicant has acknowledged the gap and committed to addressing it
 - b) the lead auditor has determined that the gap does not indicate that Stage Two is premature and
 - c) the Stage One Quality Assurance Review under Section 6.15 has confirmed readiness to proceed

GUIDANCE NOTE: A documentary gap at Stage One is not the same as a nonconformity. A documentary gap means the evidence has not yet been provided. A nonconformity - which can only be raised at Stage Two - means the product, process or service has been evaluated and found not to meet a requirement. Documentary gaps that are not resolved by Stage Two may result in Stage Two nonconformities, but that determination can only be made once the technical evaluation has been conducted.

Readiness to proceed to Stage Two

- 6.14.6 Where Stage One findings indicate that the Certification Applicant is not yet ready to proceed to Stage Two - for example because of significant documentary gaps, absence of required management system elements, or fundamental scope uncertainties - the Participating CAB should:
- d) communicate the findings clearly to the Certification Applicant in writing, identifying the matters to be addressed before Stage Two can commence
 - e) agree with the Certification Applicant a realistic timescale for addressing the identified matters
 - f) not commence Stage Two until the Stage One Quality Assurance Review under Section 6.15 has confirmed readiness to proceed

6.15 Stage One Quality Assurance Review

Conduct and independence

- 6.15.1 Following completion of Stage One evaluation activities and before commencement of Stage Two, a Participating CAB shall conduct a quality assurance review of all Stage One documentation and activities. The review shall be conducted by a person who has not been involved in any Stage One evaluation activities, including scoping, documentation review, audit activities and testing.

- 
- 6.15.2 The Stage One quality assurance review should confirm:
- a) that all required Stage One evaluation activities have been completed and documented in accordance with the applicable scheme-specific document and these Rules
 - b) that the proposed scope of certification is:
 - a. within the scope of the applicable ACCS scheme-specific document
 - b. within the Participating CAB's accredited scope under ISO/IEC 17065
 - c) that all Stage One findings have been correctly categorised in accordance with Section 6.14.4 and that the Certification Applicant's response to any documentary gaps is appropriate before Stage Two commences
 - d) that the Certification Applicant is ready to proceed to Stage Two evaluation
 - e) that the audit effort calculation remains appropriate in light of Stage One findings and that any revision required has been agreed with the Certification Applicant and notified to the Scheme Owner in accordance with ACCS-P04
- 6.15.3 The outcome of the Stage One quality assurance review shall be documented. Stage Two evaluation activities should not commence until the Stage One quality assurance review has been completed and a positive outcome recorded.
- 6.15.4 Where a positive outcome is recorded, the Participating CAB shall notify the Scheme Owner within 5 working days, providing:
- a) the identity of the Certification Applicant
 - b) the date on which the positive Stage One quality assurance review outcome was recorded
 - c) the confirmed Stage One audit day calculation
 - d) the proposed timetable for Stage Two commencement
- 6.15.5 This notification forms the basis for the Scheme Owner's levy invoice for Stage One audit days under ACCS-P04.
- 6.15.6 Where the review identifies matters that prevent a positive outcome, those matters should be communicated to the lead auditor and resolved before Stage Two commences.

GUIDANCE NOTE: The Stage One quality assurance review is a scheme-specific quality gate, not the evaluation review required before the certification decision under Section 6.18.. Both reviews are required - they serve different purposes at different points in the



certification lifecycle. The Stage One quality assurance review checks readiness to proceed to Stage Two; the evaluation review checks readiness to make a certification decision.

Extended gap between Stage One and Stage Two

- 6.15.7 Where a period of more than six months elapses between the date on which a positive Stage One quality assurance review outcome is recorded and the commencement of Stage Two evaluation, the Stage One evaluation shall be treated as having lapsed. Before Stage Two may commence, the Participating CAB shall conduct a Stage One refresh assessment to confirm that:
- a) the Certification Applicant's documentation, systems and organisational arrangements remain materially consistent with those reviewed at Stage One
 - b) any documentary gaps identified at Stage One have been addressed or remain accurately described
 - c) no material changes have occurred to the Certification Applicant's technology, scope, organisational structure or regulatory position that would affect the Stage Two evaluation
 - d) the applicable scheme-specific document and these Rules have not been revised in a manner that would require Stage One activities to be revisited
- 6.15.8 Where the Stage One refresh assessment identifies material changes, the Participating CAB shall conduct such additional Stage One activities as are necessary to ensure that Stage Two proceeds on a current and accurate evidential basis. The scope and extent of additional Stage One activities shall be determined by the lead auditor and documented.
- 6.15.9 A Stage One refresh assessment, and any additional Stage One activities arising from it, shall be treated as additional audit effort for the purposes of the Scheme Levy under ACCS-P04. The Certification Applicant shall be notified of the additional cost before the Stage One refresh assessment commences.
- 6.15.10 The Participating CAB shall notify the Scheme Owner where Stage Two commencement has been delayed beyond six months from the positive Stage One quality assurance review outcome, identifying the reason for the delay and the proposed revised timetable.

GUIDANCE NOTE: The six-month period runs from the date on which a positive Stage One quality assurance review outcome is recorded. Where the review identified matters requiring resolution, the period runs from the date those matters were confirmed as resolved and a positive outcome recorded - not from the date of the original review.

A Stage One refresh assessment is not a full repeat of Stage One. Its purpose is to verify currency. Where Stage One findings remain current and the Certification Applicant's position is unchanged, the refresh assessment may be brief. Where material changes have

occurred, additional work may be required. The lead auditor's judgment is the determining factor, subject to documentation of the rationale.

The Certification Applicant should be made aware at the point of Stage One completion - particularly where significant documentary gaps have been identified - that failure to progress to Stage Two within six months will result in additional cost. This should be reflected in the Certification Agreement or communicated in writing at Stage One completion.

Scheme Levy and payment at Stage One

- 6.15.11 The Scheme Levy attributable to Stage One audit days becomes due and payable to the Scheme Owner by the Participating CAB upon receipt of the Scheme Owner's levy invoice, which is raised following receipt of the notification required under Section 6.15.4. The Scheme Levy is payable regardless of whether Stage Two subsequently commences.
- 6.15.12 Where a Stage One refresh assessment is required under Section 6.15.7 and, where relevant, the Participating CAB shall notify the Scheme Owner on completion of the refresh assessment and recording of a positive outcome, providing the information set out in Section 6.15.4 (a)-(d) as updated. The Scheme Levy attributable to the additional audit days generated by the refresh assessment becomes due and payable on receipt of the Scheme Owner's levy invoice for those additional days.

GUIDANCE NOTE: The positive Stage One quality assurance review outcome is the milestone at which Stage One work is complete and documented. The levy payment structure reflects this - Stage One work has been done and its value to the scheme's integrity has been realised, regardless of what happens next.

The commercial payment arrangements between the Participating CAB and the Certification Applicant - typically structured as an initial payment before Stage One and a balance payment before Stage Two - are a matter for the Certification Agreement between those parties and are not governed by these Rules. Participating CABs should structure their commercial payment terms to ensure that Stage One costs are recoverable irrespective of whether Stage Two proceeds, and that the additional cost of a Stage One refresh assessment is recoverable from the Certification Applicant where delay is attributable to the Certification Applicant's failure to progress.

6.16 Stage Two Evaluation

- 6.16.1 Stage Two evaluation is the substantive technical assessment of the Certification Applicant's product, process or service against the requirements of the applicable scheme-specific document. Its purpose is to determine, on the basis of objective evidence, whether the Certification Applicant's product, process or service conforms to the applicable scheme requirements and is suitable for certification.
- 6.16.2 Stage Two evaluation builds on the documentary review conducted at Stage One. It does not repeat Stage One activities except where the Stage One Quality Assurance Review has identified matters requiring resolution, or



where a Stage One refresh assessment has been conducted under Section 6.15.7.

- 6.16.3 The outcome of Stage Two evaluation is a Stage Two audit report containing the auditor's findings, any nonconformities identified, and a certification recommendation. The Stage Two audit report does not itself constitute a certification decision - the certification decision is made by a Certification Officer following the Evaluation Review under Section 6.18.

GUIDANCE NOTE: The separation between the auditor's certification recommendation and the Certification Officer's certification decision is a fundamental requirement of ISO/IEC 17065. The auditor conducts the evaluation and makes a recommendation based on the evidence gathered. The Certification Officer reviews the evaluation record independently and makes the certification decision. These functions may not be performed by the same person.

- 6.16.4 Before substantive Stage Two evaluation activities commence, the lead auditor should confirm the status of any documentary gaps identified at Stage One. For each documentary gap recorded at Stage One:
- a) where the gap has been resolved - the Certification Applicant has supplied the required documentation or evidence - the resolution shall be recorded in the Stage Two audit report
 - b) where the gap has not been resolved - the Certification Applicant has not yet supplied the required documentation or evidence - the lead auditor shall determine whether:
 - a. Stage Two may proceed with the gap remaining open, with the expectation that it will be addressed during Stage Two
 - b. Stage Two should be paused until the gap is resolved
 - c) where a gap that was open at Stage One remains unresolved at the conclusion of Stage Two evaluation, it shall be raised as a nonconformity in accordance with Section 6.17

GUIDANCE NOTE: A documentary gap that was acceptable to carry into Stage Two becomes a nonconformity if it remains unresolved by the end of Stage Two. The Certification Applicant has had the opportunity to address it - if it has not been addressed, it represents a failure to meet a scheme requirement.

- 6.16.5 Where testing has been conducted by a registered ATL, the Participating CAB receives and reviews the ATL's test report during the Stage Two audit. The Stage Two evaluation shall not be concluded without the test report being available and reviewed.

- 6.16.6 The lead auditor should assess the test report against:
- a) the test plan agreed under Section 6.12.5
 - b) the acceptance criteria specified in the test plan
 - c) the technical requirements of the applicable scheme-specific document



6.16.7 Where the test report identifies results that do not meet the acceptance criteria, the lead auditor can raise the relevant findings as nonconformities in accordance with Section 6.17.1.

6.16.8 Where the test report is incomplete, contains material anomalies or raises questions that cannot be resolved without further testing or clarification, the lead auditor should not conclude Stage Two until those matters are resolved. The lead auditor may liaise with the ATL to obtain any necessary clarification or supplementary testing.

GUIDANCE NOTE: The test report is an input to the Stage Two audit - it is evidence that the auditor evaluates, not a self-standing certification determination. The auditor is responsible for assessing whether the test results, taken together with all other evidence gathered at Stage Two, demonstrate conformity with the applicable scheme requirements.

Nonconformities at Stage Two

6.16.9 The lead auditor shall document all nonconformities identified during Stage Two evaluation. Nonconformities can be categorised as Major Nonconformities or Minor Nonconformities in accordance with the definitions in Section 3.4. Opportunities for Improvement should also be documented where identified.

6.16.10 All nonconformities and Opportunities for Improvement shall be communicated to the Certification Applicant. Nonconformities should be communicated at the latest at the closing meeting of the Stage Two evaluation activity, together with the evidence on which each nonconformity is based.

6.16.11 The Certification Applicant can be invited to respond to each nonconformity. The lead auditor shall assess the Certification Applicant's response and determine whether:

- a) the nonconformity has been resolved to the auditor's satisfaction and may be closed
- b) the nonconformity remains open and shall be identified in the Stage Two audit report

Certification recommendation

6.16.12 On completion of Stage Two evaluation, the lead auditor shall prepare a Stage Two audit report setting out:

- a) a summary of Stage Two evaluation activities conducted
- b) the status of all Stage One documentary gaps - resolved or carried forward as nonconformities
- c) the test results and the auditor's assessment of the test report
- d) all nonconformities identified, their category, the evidence on which they are based, and their current status - open or closed
- e) all Opportunities for Improvement identified

- 
- f) the auditor's assessment of the overall conformity of the Certification Applicant's product, process or service against the applicable scheme requirements
- g) the auditor's certification recommendation - being one of:
- **Recommend certification** - the auditor considers that sufficient objective evidence of conformity has been demonstrated and all Major Nonconformities are closed or there are none
 - **Recommend certification subject to conditions** - the auditor considers that conformity has been demonstrated subject to Minor Nonconformities remaining open under agreed corrective action plans
 - **Recommend deferral** - the auditor considers that Stage Two cannot be concluded without further evaluation, testing or resolution of nonconformities
 - **Recommend refusal** - the auditor considers that conformity has not been demonstrated

- 6.16.13 The certification recommendation is the auditor's professional judgment based on the evidence gathered. It is not a certification decision. The certification decision shall be made by the Certification Decision Maker following the Evaluation Review under Section 6.18.

GUIDANCE NOTE: The lead auditor's certification recommendation is a critical input to the Evaluation Review and certification decision process. It should be clearly stated, well-reasoned and directly referenced to the evidence in the Stage Two audit report. A well-prepared Stage Two audit report enables the Certification Officer to conduct the Evaluation Review without needing to seek clarification from the audit team - which is the standard set by Section 6.18.

6.17 Nonconformity Management

Initial Certification

- 6.17.1 Nonconformities identified during Stage Two evaluation should be managed as follows:
- a) A Major Nonconformity shall be closed and evidence of closure verified by the Participating CAB before a positive certification recommendation may be made. Where a Major Nonconformity cannot be closed before the Stage Two audit report is finalised, the auditor shall recommend deferral or refusal as appropriate.
 - b) A Minor Nonconformity does not prevent a positive certification recommendation, provided the Certification Applicant has submitted a documented corrective action plan acceptable to the lead auditor. The corrective action plan shall specify the actions to be taken, the person responsible and the target closure date, which should not exceed 8 weeks from the date the nonconformity was raised without justification.



The Minor Nonconformity should be verified as closed at or before the first surveillance activity.

- c) An Opportunity for Improvement carries no mandatory closure requirement. The Certification Applicant should address it where possible before the first surveillance activity.

During Period of Certification

- 6.17.2 Nonconformities identified during surveillance, recertification or other evaluation activities during the period of certification should be managed as follows:
- a) A Major Nonconformity shall be closed within 4 weeks of being raised. Where a Major Nonconformity is not closed within this period, the Participating CAB may consider suspension of certification in accordance with Section 8.5
 - b) A Minor Nonconformity shall be closed within 8 weeks of being raised. Where a Minor Nonconformity is not closed within this period, the Participating CAB may consider whether it should be reclassified as a Major Nonconformity
 - c) An Opportunity for Improvement carries no mandatory closure requirement but should be addressed prior to the next scheduled evaluation activity where possible
 - d) Where a pattern of related Minor Nonconformities is identified across surveillance activities, the Participating CAB should consider whether the pattern indicates a systemic failure that should be reclassified as a Major Nonconformity

GUIDANCE NOTE: The reclassification provision at (e) reflects the definition of Major Nonconformity at Section 3.4.2, which includes a pattern of related minor nonconformities indicating systemic failure. An auditor who sees the same Minor Nonconformity recurring across two or more surveillance activities should consider whether the underlying cause has been genuinely addressed or whether a systemic issue exists.

6.18 Evaluation Review

Conduct and independence

- 6.18.1 A Participating CAB shall conduct an evaluation review of all evaluation activities and the Stage Two audit report before making a certification decision. The evaluation review shall be conducted by an Evaluation Reviewer who was not involved in any evaluation or audit activities in respect of the certification activity under review, including scoping, Stage One, testing and Stage Two.
- 6.18.2 The Evaluation Reviewer shall conduct the review on the basis of the evaluation record. Where the Evaluation Reviewer requires clarification of



technical findings, testing methodology or evidence in the evaluation record, that clarification may be sought from the lead auditor and documented. Any clarification provided should be recorded as a supplement to the evaluation record before the certification decision is made.

- 6.18.3 Where the evaluation record contains material gaps that cannot be resolved through clarification (for example where required evaluation activities have not been completed, where the evidence base is insufficient to support a finding, or where the audit report is inconsistent with the test report) the Evaluation Reviewer should return the evaluation record to the lead auditor for completion or correction before the review proceeds.

GUIDANCE NOTE: The independence requirement for the Evaluation Reviewer does not prohibit dialogue with the audit team - it prohibits the Evaluation Reviewer from having been involved in the evaluation activities themselves. An Evaluation Reviewer who asks a technical question about a finding and receives a documented answer is conducting a thorough review. An Evaluation Reviewer who was also the lead auditor is not independent, regardless of whether they seek clarification. The distinction is about who conducted the evaluation, not about whether the review involves discussion.

Purpose of the evaluation review

- 6.18.4 The purpose of the evaluation review is to confirm that:
- a) all required evaluation activities have been completed in accordance with the applicable scheme-specific document and these Rules
 - b) the evaluation record - comprising the Stage One documentation, the Stage One Quality Assurance Review record, the test report where applicable, and the Stage Two audit report - is complete, consistent and sufficient to support a certification decision
 - c) all nonconformities have been correctly categorised in accordance with Section 3.4 and managed in accordance with Sections 6.16 and 6.17
 - d) the auditor's certification recommendation is supported by the evidence in the evaluation record
 - e) the proposed certification decision is appropriate in light of the evaluation record and the auditor's certification recommendation

Outcome of the evaluation review

- 6.18.5 The outcome of the evaluation review shall be documented. The Evaluation Reviewer shall record:
- a) confirmation that each of the matters in Section 6.18.4 (a)-(e) has been addressed
 - b) any matters arising from the review that require resolution before the certification decision is made
 - c) the Evaluation Reviewer's proposed certification decision

- 
- 6.18.6 Where the evaluation review identifies matters that cannot be resolved on the basis of the existing evaluation record, the Evaluation Review can determine whether:
- a) additional evaluation activities are required - in which case those activities should be planned and conducted before the certification decision is made
 - b) the auditor's certification recommendation should be revised - in which case the lead auditor should be notified and invited to revise the recommendation before the decision is made
- 6.18.7 The evaluation review and certification decision can be completed as a single integrated process.

6.19 Certification Decision

Authority and Responsibility

- 6.19.1 The certification decision shall be made by a Certification Decision Maker (who may be the same person as the Evaluation Reviewer) employed by or formally contracted to the Participating CAB, acting within the CAB's management system and under the CAB's full responsibility. The certification decision shall not be outsourced or delegated outside the CAB's management system. The Participating CAB retains full responsibility for all certification decisions made under its authority.

Decision types

- 6.19.2 Following completion of the evaluation review, the Certification Decision Maker can make one of the following decisions:
- a) **Grant certification** - where the evaluation review confirms sufficient objective evidence of conformity and all Major Nonconformities are closed
 - b) **Grant certification subject to conditions** - where Minor Nonconformities remain open subject to documented corrective action plans acceptable to the Certification Decision Maker, with the conditions, the open nonconformities and the required closure timescales specified in writing
 - c) **Defer certification** - where further evaluation activities or resolution of nonconformities is required before a decision can be made, with a defined timescale for resolution not exceeding 4 weeks from the date of deferral
 - d) **Refuse certification** - where conformity has not been demonstrated, with written reasons provided to the Certification Applicant

- 
- 6.19.3 The same decision framework applies to certification maintenance, scope extension, scope reduction, recertification and reinstatement following suspension.

Notification of decision

- 6.19.4 The Certification Decision Maker shall notify the Certification Applicant of the certification decision in writing. Where certification is refused, the notification shall include the reasons for the decision and advise the Certification Applicant of their right to appeal under Section 9.6.
- 6.19.5 Where certification is granted or granted subject to conditions, the Participating CAB shall notify the Scheme Owner of the certification decision within 5 working days, providing
- a) the identity of the Certification Applicant
 - b) the date of the certification decision
 - c) the scope of certification granted
 - d) the classification accuracy level achieved, where applicable to the scheme
 - e) any conditions attaching to the grant
 - f) the confirmed total audit day calculation for the complete certification activity
 - g) the proposed certificate expiry date
- 6.19.6 This notification forms the basis for:
- a) the Scheme Owner's levy invoice for Stage Two audit days under ACCS-P04
 - b) the Scheme Owner's update of the public certification registry under Section 7.5

Certification decisions by Applicant CABs

- 6.19.7 Where a certification decision is to be made by an Applicant CAB, the following additional requirements apply before the certification decision is issued.
- 6.19.8 Before issuing a certification decision, the Applicant CAB shall notify the Scheme Owner of the proposed decision, providing:
- a) the identity of the Certification Applicant
 - b) a summary of the evaluation record, including the Stage Two audit report, test report where applicable, and Evaluation Review record
 - c) the proposed certification decision and the basis on which it is made
 - d) a summary of any nonconformities identified, their categorisation and their current status



- e) the proposed scope and conditions of certification, where the decision is to grant

- 6.19.9 The Scheme Owner shall have 10 working days from receipt of the notification to review the proposed decision and evaluation summary. During this period the Scheme Owner may:
- a) confirm that it has no concerns with the proposed decision - in which case the Applicant CAB may proceed to issue the decision
 - b) raise specific concerns about the proposed decision, the evaluation record or the categorisation of findings - in which case the Applicant CAB shall consider those concerns before proceeding
- 6.19.10 Where the Scheme Owner does not respond within 10 working days, the Applicant CAB may proceed to issue the decision.
- 6.19.11 Where the Scheme Owner raises concerns, the Applicant CAB shall:
- a) consider each concern raised and document its response
 - b) determine whether the concern requires any change to the proposed certification decision, additional evaluation activities or revision of the evaluation record
 - c) notify the Scheme Owner of its response and its final decision before issuing the certification decision
- 6.19.12 The Applicant CAB is not required to follow the Scheme Owner's view. Where the Applicant CAB proceeds with a decision contrary to a concern raised by the Scheme Owner, it shall document its reasons clearly. The Scheme Owner may take that decision into account in its ongoing oversight of the Applicant CAB under ACCS-P01 but shall not use disagreement with a certification decision as the sole basis for any adverse action against the Applicant CAB.
- 6.19.13 Nothing in this clause derogates from the Applicant CAB's authority and responsibility to make certification decisions. The pre-decision consultation process is a scheme oversight mechanism - it does not constitute joint decision-making, and the Scheme Owner's role in this process does not make the Scheme Owner a party to the certification decision.

Impartiality of the Scheme Owner in the review process

- 6.19.14 The Scheme Owner shall manage its review function under this clause in a manner consistent with its impartiality obligations under Section 11 of these Rules. In particular:
- a) **Personnel conducting the review** - the Scheme Owner's review of a proposed certification decision shall be conducted by a person who has no direct involvement in the evaluation activities under review and no



personal or commercial interest in the outcome of the certification decision

- b) **Financial interest** - the Scheme Owner shall not allow its financial interest in the Scheme Levy to influence its review of a proposed certification decision. The review shall be conducted on technical and governance grounds only. The Scheme Owner's impartiality arrangements under Section 11 apply to the exercise of this function
- c) **Conflicts of interest** - any person appointed by the Scheme Owner to conduct the review under this clause shall declare any conflict of interest before conducting the review. Where a conflict exists that cannot be adequately managed, a different reviewer should be appointed
- d) **Record of review** - the Scheme Owner shall maintain a record of each review conducted under this clause, including the identity of the reviewer, the concerns raised if any and the outcome

Impartiality of the Applicant CAB

- 6.19.15 The Applicant CAB shall maintain its independence in making certification decisions under this clause and should not defer to the Scheme Owner's view for reasons unconnected with the technical and governance merits of the concerns raised. In particular:
- a) the Applicant CAB's provisional admission status should not be treated as a reason to accept Scheme Owner concerns that the Applicant CAB considers to be unfounded
 - b) the Applicant CAB should document its independent assessment of any Scheme Owner concern, including its reasons for accepting or rejecting it
 - c) where the Applicant CAB considers that the Scheme Owner's review function is being exercised in a manner that compromises its independence - including where the Scheme Owner is applying pressure to reach a particular certification outcome - the Applicant CAB may refer the matter to their accreditation body or to the independent oversight mechanism established under Section 11.4.

GUIDANCE NOTE: The pre-decision consultation requirement applies only to Applicant CABs under provisional admission. Once full admission is granted under ACCS-P01, the Participating CAB makes certification decisions without the pre-decision consultation requirement - subject to the standard notification obligations under Section 6.19.5.

The Applicant CAB's right to refer concerns about Scheme Owner conduct to an accreditation body is an important safeguard.

Scheme Levy - Stage Two

- 6.19.16 The Scheme Levy attributable to Stage Two audit days becomes due and payable to the Scheme Owner by the Participating CAB upon receipt of the Scheme Owner's levy invoice following the notification under Section 6.19.5, regardless of the outcome of any subsequent appeal.

GUIDANCE NOTE: Post-certification actions under this section mark the transition from the evaluation process to the ongoing certification lifecycle. The Certification Client is now subject to the surveillance, change management and ongoing obligations set out in the sections that follow. The Participating CAB should ensure the Certification Client is aware of those ongoing obligations at the point of certification grant - ideally through a post-certification briefing document or covering letter accompanying the Certificate of Conformity.

6.20 Surveillance and Certification Monitoring

- 6.20.1 Participation in certification monitoring and surveillance is a mandatory condition of certification under all ACCS schemes. A Certification Client that refuses to participate in, or fails to cooperate with, surveillance activities may be subject to the provisions of Section 8 regarding nonconformities and potential suspension or withdrawal of certification.
- 6.20.2 The Certification Agreement shall reflect the Certification Client's obligation to participate in all surveillance activities required during the certification period, including audit-based surveillance and, where applicable, automated monitoring services.

Purpose of surveillance

- 6.20.3 The purpose of certification monitoring and surveillance is to provide ongoing assurance that the certified product, process or service continues to conform to the applicable scheme requirements throughout the certification period. Surveillance should be:
- proportionate** - the frequency and intensity of surveillance should be commensurate with the risk profile of the certified product, process or service, the Certification Client's compliance history and the nature of the certification scope
 - risk-based** - surveillance plans should take into account factors including the size of the Certification Client, the complexity of the certified scope, the presence of automated or manual decision processes, and any nonconformities identified at previous evaluations
 - documented** - all surveillance activities and their outcomes should be documented in accordance with these Rules and the applicable scheme-specific document



Types of surveillance activity

- 6.20.4 Surveillance under ACCS schemes may comprise any combination of the following:
- a) **Periodic audit-based surveillance** - structured evaluation activities conducted at defined intervals during the certification period, assessing continued conformity with scheme requirements through document review, interview, observation and sampling
 - b) **Automated monitoring services** - continuous or periodic automated monitoring of the Certification Client's certified product, process or service against defined performance indicators, as described in Section 6.20.6
 - c) **Random or unannounced sampling** - sampling of age check decisions, system outputs or publicly available information without prior notice to the Certification Client, where the applicable scheme-specific document provides for this
 - d) **Triggered surveillance** - additional surveillance activities initiated in response to a complaint, a change affecting certification, an adverse media finding or a Scheme Owner notification
 - e) **Documentary review** - review of policies, practice statements, technical documentation and other records required to be maintained by the Certification Client under the applicable scheme-specific document
- 6.20.5 The applicable scheme-specific document specifies the minimum surveillance requirements applicable to each certification scope and client type.

Automated monitoring services

- 6.20.6 The Scheme Owner may operate, or approve the operation of, automated monitoring services for continuous or periodic assessment of Certification Client performance against defined scheme indicators.
- 6.20.7 Where automated monitoring services are operated under the scheme:
- a) the Scheme Owner may publish the technical specification of the monitoring service, including the indicators monitored, the data collected, the frequency of monitoring and the thresholds that trigger notification, in the applicable scheme-specific document or in a technical annex to it
 - b) the Certification Client should maintain the technical integration required to enable automated monitoring, including any API connections, data feeds or access credentials specified by the Scheme Owner

- 
- c) the Participating CAB may incorporate the outputs of automated monitoring into its surveillance planning - automated monitoring outputs may increase or decrease the frequency and intensity of audit-based surveillance activities where the applicable scheme-specific document provides for this
 - d) where automated monitoring identifies a potential nonconformity or performance deviation, the Participating CAB shall investigate and determine whether a formal nonconformity should be raised in accordance with Section 6.17
 - e) the Certification Client shall not manipulate, interfere with or circumvent automated monitoring systems. Any evidence of manipulation may be treated as a Major Nonconformity and may result in immediate suspension of certification

GUIDANCE NOTE: Automated monitoring is a tool for continuous assurance - it does not replace audit-based surveillance but supplements it. The value of automated monitoring lies in its ability to detect performance deviations in near-real-time, enabling the Participating CAB to respond promptly to emerging issues rather than discovering them at the next scheduled audit. For age assurance systems processing large volumes of age check decisions, automated monitoring provides a level of ongoing assurance that periodic audit alone cannot deliver.

The technical specification of automated monitoring services is a matter for the applicable scheme-specific document. ACCS 0 establishes the governance framework - including the obligation to participate, the prohibition on manipulation, and the integration of monitoring outputs into surveillance planning. The detail of what is monitored, how, and at what thresholds belongs in ACCS1.

Surveillance frequency

- 6.20.8 The frequency of surveillance activities during the certification period should be determined by the Participating CAB on a risk-based assessment taking into account:
- a) the factors specified in the applicable scheme-specific document for the relevant certification scope and client type
 - b) the volume of age check decisions made by the Certification Client during the certification period
 - c) the presence or absence of automated monitoring services and the outcomes generated by them
 - d) the Certification Client's compliance history - including nonconformities identified at previous evaluations, the timeliness of their closure and the outcome of previous surveillance activities
 - e) any changes affecting certification notified by the Certification Client or identified through other means
- 6.20.9 As a minimum, audit-based surveillance shall be conducted at least once within the first 12 months of the certification period, regardless of the outcomes of automated monitoring. The certification period shall not



exceed the term specified in the applicable scheme-specific document. Any surveillance activity should not be more than 12 months apart.

GUIDANCE NOTE: The minimum 12-month audit-based surveillance requirement is a scheme floor - it ensures that even Certification Clients with clean automated monitoring records receive at least one structured audit-based evaluation per certification cycle. Automated monitoring reduces the burden of audit-based surveillance but does not eliminate it.

- 6.20.10 As a general guiderail for audit effort planning:
- Annual surveillance** - the audit effort for a scheduled surveillance activity would typically be approximately one third of the initial certification audit effort calculation for the same certified scope. This reflects the more focused sampling nature of surveillance, which builds on the established evaluation record rather than conducting a full initial assessment
 - Recertification** - the audit effort for recertification would typically be approximately two thirds of the initial certification audit effort calculation for the same certified scope. This reflects the need to re-examine the full scope at recertification while taking appropriate account of the surveillance record and evidence accumulated during the certification period
- 6.20.11 These guiderails are indicative only. The actual audit effort for any surveillance or recertification activity should be determined by the Participating CAB on a risk-based assessment taking into account the factors in Section 6.20.8 (a)-(e), and in particular:
- downward adjustment** may be appropriate where the Certification Client has a clean surveillance record, active automated monitoring with consistently positive outcomes, and no significant changes during the certification period
 - upward adjustment** may be appropriate where nonconformities have been identified during the certification period, where significant changes have occurred to the certified scope, where extension of scope activities have been conducted, or where automated monitoring has identified performance concerns
- 6.20.12 The confirmed audit effort for each surveillance and recertification activity shall be notified to the Scheme Owner in accordance with Section 6.20.13 and ACCS-P04.

GUIDANCE NOTE: The one-third and two-thirds guiderails are reference points, not caps or floors. They reflect typical practice for a Certification Client whose certified scope and compliance position are broadly stable. Where the Certification Client's circumstances have changed materially - for example through significant product development, a change of legal entity, extension of scope, or identification of systemic nonconformities - the audit effort should be assessed on its merits rather than by reference to the guiderail. The



guiderails are primarily useful for commercial planning - they allow Certification Clients to budget for ongoing certification costs with reasonable confidence and allow Participating CABs to give realistic cost indications at the outset of the certification relationship.

Scheme Levy at surveillance

- 6.20.13 The Scheme Levy attributable to surveillance audit days becomes due and payable to the Scheme Owner following completion of each surveillance activity. The Participating CAB shall notify the Scheme Owner of the completion of each surveillance activity within 5 working days, providing:
- a) the identity of the Certification Client
 - b) the date on which the surveillance activity was completed
 - c) the confirmed audit day calculation for the surveillance activity
 - d) the outcome of the surveillance - conforming or nonconforming
 - e) any nonconformities raised, their categorisation and their current status
- 6.20.14 This notification forms the basis for the Scheme Owner's levy invoice for surveillance audit days under ACCS-P04 and updates the Scheme Owner's oversight records.

Recertification

- 6.20.15 Where a Certification Client intends to continue certification beyond the initial certification period, the Participating CAB shall initiate the recertification process sufficiently in advance of the certificate expiry date to ensure that the recertification evaluation is completed and a new certification decision made before expiry. As a guiderail, recertification should be initiated not less than six months before the certificate expiry date.
- 6.20.16 Recertification follows an abbreviated version of the initial certification process, returning to Stage One planning, with the scope and intensity of Stage One activities determined by the surveillance record and the Certification Client's compliance history during the certification period.

Expiry without completed recertification

- 6.20.17 The certification period cannot be extended beyond its expiry date pending recertification. Where recertification is not completed before expiry:
- a) the Certificate of Conformity shall be treated as expired on the expiry date
 - b) the Certification Client shall cease all use of the certification mark with immediate effect from the expiry date
 - c) the Participating CAB shall notify the Scheme Owner of the expiry without recertification within 2 working days of the expiry date, so that the public registry may be updated to reflect the lapsed status

should include the recommended recertification initiation date in post-certification communications to Certification Clients.

Where a Certification Client allows their certificate to expire - whether through inaction or because recertification was unsuccessful - the gap in certified status is a matter of public record through the registry. This is a commercial incentive for Certification Clients to initiate recertification in good time.

6.21 Extension of Scope

Application for extension

- 6.21.1 A Certification Client may apply to the Participating CAB for an extension to their certified scope at any time during the certification period. An extension of scope application may be triggered by:
- a) a request from the Certification Client to add products, processes, services, technology types, classification accuracy levels, jurisdictions or contexts of use to their certified scope
 - b) an administrative amendment that, on assessment under Section 8.1.3-8.1.5, is determined to require evaluation of the proposed change before it can be approved
 - c) a change affecting certification identified by the Participating CAB or the Scheme Owner under Section 8.1-8.2 that requires evaluation of a changed element of the certified scope
 - d) a regulatory requirement that the Certification Client's certified scope be extended to cover a new jurisdiction or context of use
- 6.21.2 Extensions of scope vary significantly in their scope, complexity and required evaluation effort. The Participating CAB shall assess each extension application and determine the appropriate evaluation pathway, having regard to:
- a) **Additional product, process or service of the same technology type** - where the Certification Client seeks to add an additional product, process or service that is materially similar in technology type and architecture to the existing certified scope. Evaluation effort should focus on the differences between the existing certified scope and the proposed additional scope
 - b) **Additional technology type within the same scheme** - where the Certification Client seeks to add a product, process or service of a materially different technology type or architecture from the existing certified scope. Evaluation effort should be assessed on a basis approaching initial certification for the new scope element
 - c) **Additional jurisdiction or context of use** - where the Certification Client seeks to extend an existing certified product, process or service to a new jurisdiction or context of use. Evaluation effort should focus on the



applicable regulatory requirements and contextual factors relevant to the new jurisdiction or context

- d) **Additional classification accuracy level** - where the Certification Client seeks certification at a higher classification accuracy level than currently certified. Evaluation effort should focus primarily on testing to demonstrate the higher performance threshold
- e) **Administrative extension** - where the proposed extension involves no material technical change to the certified product, process or service, such as a new geographic deployment of an already-certified system. The Participating CAB should determine whether the administrative extension may be processed under Section 8.1.3-8.1.5 or requires a formal extension of scope evaluation

- 6.21.3 The applicable scheme-specific document specifies the evaluation requirements and acceptance criteria applicable to each type of extension.

Extension scoping and audit effort

- 6.21.4 Following receipt of an extension of scope application, the Participating CAB may conduct an extension scoping exercise with the Certification Client to:
- a) define the proposed extension and its boundaries
 - b) assess the type of extension in accordance with Section 6.21.2
 - c) determine the evaluation pathway and audit effort applicable to the extension
 - d) confirm that the proposed extension falls within the Participating CAB's admitted scope under ACCS-P01 and its accredited scope under ISO/IEC 17065

- 6.21.5 The audit effort for the extension shall be calculated in accordance with ACCS-P04 and notified to the Scheme Owner in accordance with the provisions applicable to initial certification audit effort.

Extension evaluation

- 6.21.6 The extension of scope evaluation should follow the same general structure as initial certification - Stage One documentation review, Stage Two technical evaluation and testing where required, Evaluation Review and certification decision - with the scope and intensity of each stage calibrated to the type of extension as determined under Section 6.21.2.
- 6.21.7 Where testing is required for the extension, a separate test plan shall be prepared in accordance with Section 6.12.5 before testing commences.

- 
- 6.21.8 The Evaluation Reviewer and Certification Decision Maker for the extension evaluation shall meet the same independence requirements as for initial certification.

Relationship to existing certification

- 6.21.9 During the extension of scope evaluation, the Certification Client's existing certification remains valid and the certification mark may continue to be used in respect of the existing certified scope. The extension of scope evaluation does not affect the certification period applicable to the existing certified scope.

- 6.21.10 Where an extension of scope evaluation identifies nonconformities that relate to the existing certified scope - as opposed to the proposed extension - the Participating CAB shall assess whether those nonconformities affect the validity of the existing certification and shall manage them accordingly under Section 6.17 and, where applicable, Section 8.

- 6.21.11 On completion of a successful extension of scope evaluation, the Participating CAB shall:
- a) issue a revised Certificate of Conformity reflecting the extended scope
 - b) issue a revised Schedule of Certification
 - c) notify the Scheme Owner of the extension within 5 working days so that the public registry may be updated
 - d) notify the Certification Client of any revised mark use authorisation applicable to the extended scope under ACCS-P03

- 6.21.12 The certification period for the extended scope shall be aligned with the certification period of the existing certified scope - the extension does not reset the certification period unless the Participating CAB determines, having regard to the nature and scale of the extension, that a fresh certification period is appropriate.

GUIDANCE NOTE: Aligning the certification period for the extended scope with the existing certification period avoids the administrative complexity of managing multiple concurrent certification periods for the same Certification Client. It does mean that where an extension is granted close to the recertification date, the extended scope will have a relatively short initial period before recertification is required. This should be explained to the Certification Client at the extension scoping stage.

Failed extension application

- 6.21.13 Where an extension of scope evaluation results in a decision not to grant the extension, the existing certification is not affected. The Certification Client retains their existing certified scope and may continue to use the certification mark in respect of that scope. The Participating CAB shall notify the Certification Client in writing of the reasons for the decision not to extend and of their right to appeal under Section 9.6.

Scheme Levy for extension activities

- 6.21.14 The Scheme Levy attributable to extension of scope audit days shall be calculated and notified to the Scheme Owner in accordance with ACCS-P04 and the provisions of Section 6.15.11-6.15.12 and 6.19.16, applied to the extension evaluation activities.

7.1 Certification Documentation Structure

7.1.1 On the grant of certification under an ACCS scheme, the Participating CAB may issue the following certification documentation to the Certification Clients:

- a) a **Certificate of Conformity** - a single-page document confirming the grant of certification, containing the mandatory content specified in Section 7.2
- b) a **Schedule of Certification** - a document setting out the scope of certification and identifying and cross-referencing the applicable certified Practice Statement and other relevant certification documents, as specified in Section 7.3
- c) where required by the applicable scheme-specific document, a certified copy of the **Practice Statement** - in both public and private forms as specified in Section 7.4

7.1.2 The Certificate of Conformity and Schedule of Certification shall be read together. The Schedule of Certification forms part of the certified documentation - a reference in the Certificate of Conformity to the Schedule is sufficient to incorporate its contents.

7.2 Certificate of Conformity

Mandatory content

7.2.1 The Certificate of Conformity shall contain, as a minimum

- a) the name, address and accreditation number of the Participating CAB
- b) the marks applicable to the certificate, positioned as follows:
 - i. the ACCS certification mark may be displayed in the bottom left (unless the requirements of the national accreditation body affect this) of the certificate, in accordance with the mark use requirements of Section 4 and ACCS-P03
 - ii. the Participating CAB's accreditation mark - being the CAB's Logo and national accreditation body symbol together with the CAB's accreditation schedule number - shall be displayed in accordance with national accreditation body's conditions for the use of the accreditation symbol (usually the bottom right). This mark shall not



appear on an CAB Applicant's certification until the requisite accreditation has been granted

- c) the date on which certification is granted - which shall not precede the date of the certification decision
- d) a prominent statement of the object of certification - identifying the product, process or service certified, the applicable certification scheme and the standard and other normative document including the date of publication
- e) the name and address of the Certification Client
- f) the certification period - expressed as a start date and expiry date
- g) a unique certificate reference number
- h) a reference to the Schedule of Certification accompanying the certificate
- i) the name, authorisation and signature of the Certification Decision Maker - which may be an electronic signature

GUIDANCE NOTE: Items (a), (c), (d), (e), (f) and (j) reflect the minimum content required by ISO/IEC 17065. Items (b), (g), and (h) are scheme-specific additions. A Participating CAB may include additional content on its Certificate of Conformity provided it does not conflict with the mandatory content requirements above or with the mark use conditions in ACCS-P03.

Conditions for issue

7.2.2 The Certificate of Conformity shall only be issued to the Certification Client where:

- a) the certification decision to grant certification has been made and documented in accordance with Section 6.19
- b) all certification requirements have been fulfilled, including any conditions attaching to a conditional grant
- c) the Certification Agreement has been completed and signed by the Certification Client
- d) sanctions, PEP and adverse media screening has been completed and cleared in accordance with Section 6.8
- e) the Schedule of Certification and, where applicable, the Public Practice Statement have been prepared and are ready for issue alongside the certificate

Ownership and control

7.2.3 The Certificate of Conformity remains the property of the Participating CAB at all times. The Certification Client is granted a licence to use the certificate as evidence of their certified status for the duration of the certification period. That licence is subject to the Certification Client's ongoing compliance with the scheme requirements and shall be revoked on suspension, withdrawal or expiry of certification.

- 
- 7.2.4 On suspension, withdrawal or expiry of certification, the Certification Client shall be required by the Participating CAB to:
- a) cease all use of the Certificate of Conformity as evidence of current certified status
 - b) cease all use of the certification mark in accordance with ACCS-P03
 - c) return or destroy the Certificate of Conformity if required to do so by the Participating CAB

- 7.2.5 The Participating CAB shall notify the Scheme Owner immediately on suspension, withdrawal or expiry of any certificate so that the public registry may be updated.

7.3 Schedule of Certification

- 7.3.1 The Schedule of Certification may accompany the Certificate of Conformity and should contain:
- a) the full scope of certification including all products, processes, services and any version, configuration or release status
 - b) the applicable scheme-specific document and version against which certification has been granted
 - c) the applicable normative standards and their editions
 - d) any conditions attaching to the grant of certification, with the required closure timescales
 - e) any assumptions, limitations or exclusions applicable to the certified scope
 - f) a reference to the certified copy of the Public Practice Statement published on the ACCS registry, where applicable
 - g) a reference to any certified documents - including practice statements, technical specifications or other documentation that forms part of the certified scope
 - h) the surveillance schedule - specifying the minimum frequency of surveillance activities during the certification period
- 7.3.2 The Schedule of Certification should be updated to reflect any extension of scope, condition closure or change affecting certification during the certification period (See Sections 6.21 and 8). The Certification Client should be issued with a revised Schedule on each update. The Participating CAB shall notify the Scheme Owner of any revision to the Schedule so that the public registry may be updated accordingly.



7.4 Practice Statements

- 7.4.1 Where the applicable scheme-specific document requires a practice statement, the Certification Client shall maintain a current practice statement throughout the certification period. The practice statement describes how the certified product, process or service operates and how it meets the applicable scheme requirements.

Public Practice Statement

- 7.4.2 The Public Practice Statement is a summary document suitable for publication in accordance with the requirements in ISO/IEC 27566-1. It should describe, in terms accessible to the general public and to regulators:
- a) the nature of the certified product, process or service
 - b) the context or contexts of use in which the certified product, process or service has been assessed
 - c) the classification accuracy level achieved
 - d) the scheme under which certification has been granted and the normative standard against which the assessment was conducted
 - e) any material limitations or conditions applicable to the certified scope
- 7.4.3 A certified copy of the Public Practice Statement shall be published on the ACCS registry on the grant of certification and kept current throughout the certification period. The Certification Client is responsible for notifying the Participating CAB of any changes to the Public Practice Statement. The Participating CAB shall review any proposed changes and, where approved, notify the Scheme Owner so that the registry may be updated.

Private Practice Statement

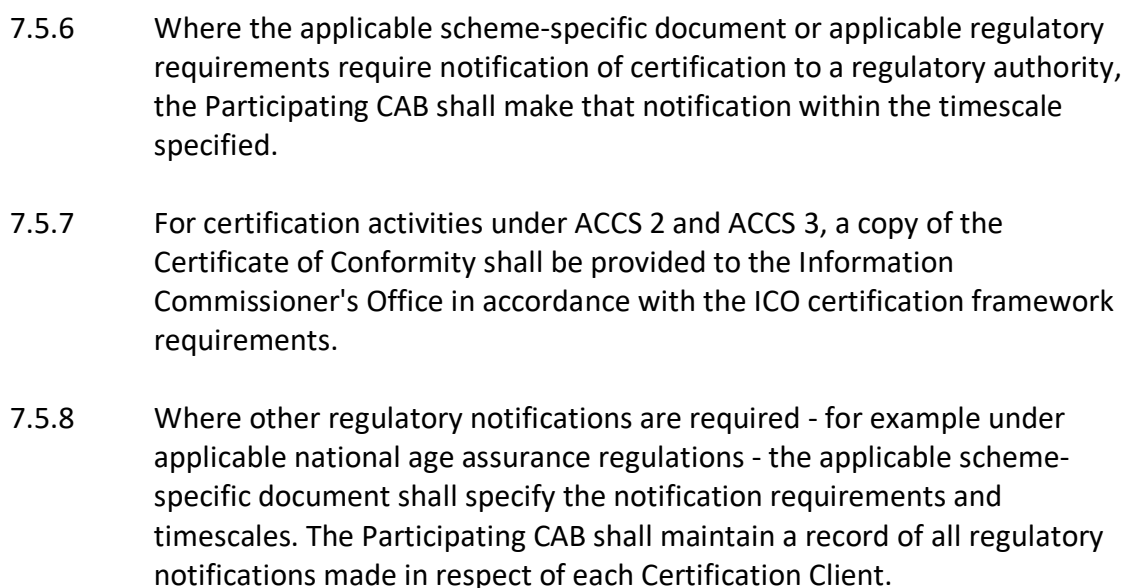
- 7.4.4 The Private Practice Statement is a detailed technical document meeting the requirements of the applicable scheme-specific document and in accordance with ISO/IEC 27566-1. It contains the full technical description of the certified product, process or service, including information that may be commercially sensitive or operationally confidential.
- 7.4.5 A certified copy of the Private Practice Statement shall be:
- a) held by the Participating CAB as part of the certification record
 - b) made available to the Scheme Owner on request for oversight purposes
 - c) made available to relevant regulatory authorities on request, subject to appropriate confidentiality arrangements
- 7.4.6 Where a regulatory authority requires access to the Private Practice Statement, the Participating CAB shall facilitate that access in a manner consistent with the Certification Client's confidentiality interests.



GUIDANCE NOTE: The distinction between the Public and Private Practice Statements reflects the dual purpose of certification documentation - transparency for consumers, regulators and the public on the one hand, and protection of commercially sensitive technical information on the other. The Public Practice Statement gives the public and regulators sufficient information to understand what has been certified and at what level. The Private Practice Statement provides the technical detail needed for regulatory oversight and scheme integrity without requiring full public disclosure of proprietary information.

7.5 ACCS Public Registry

- 7.5.1 The Scheme Owner shall maintain a public registry of current certifications on the scheme website. The public registry is the authoritative record of current certifications under ACCS schemes. It is independent of any local registries maintained by individual Participating CABs.
- 7.5.2 The public registry should contain, for each current certification:
- a) the name and registered address of the Certification Client
 - b) the object of certification
 - c) the applicable ACCS scheme
 - d) the certification period - start date and expiry date
 - e) the unique certificate reference number
 - f) the name of the Participating CAB that granted the certification
 - g) any conditions attaching to the current certificate
 - h) a link to the certified copy of the Public Practice Statement, where applicable
- 7.5.3 The Participating CAB shall notify the Scheme Owner of the information required for the public registry within 5 working days of:
- a) the grant of initial certification
 - b) the grant of an extension of scope
 - c) the issue of a revised Schedule of Certification
 - d) any change to the certification status - including suspension, reinstatement, withdrawal or expiry
 - e) any update to the certified copy of the Public Practice Statement
- 7.5.4 The Scheme Owner shall update the public registry within 3 working days of receiving notification from the Participating CAB.
- 7.5.5 A Participating CAB may maintain its own local registry of certifications granted under ACCS schemes. The CAB's local registry is supplementary to - not a replacement for - the ACCS public registry. Where there is any inconsistency between the information in the CAB's local registry and the ACCS public registry, the ACCS public registry shall prevail as the authoritative record.



GUIDANCE NOTE: Regulatory notification requirements vary by scheme and may also vary by jurisdiction for internationally operating Certification Clients. The Participating CAB should confirm the applicable notification requirements at the scoping stage and include them in the evaluation plan. The Scheme Owner maintains a current summary of known regulatory notification requirements at www.accscheme.com/regulatory.



8. Changes Affecting Certification, Nonconformities and Enforcement

8.1 Changes Initiated by the Certification Client

Obligation to notify

- 8.1.1 A Certification Client shall notify the Participating CAB promptly of any change that may affect the certified scope, the basis on which certification was granted, or the Certification Client's ability to comply with scheme requirements. Changes requiring notification include but are not limited to:
- a) changes to the technology, architecture or configuration of the certified product, process or service
 - b) changes to the Certification Client's organisational structure, ownership or legal entity
 - c) changes to the contexts of use, jurisdictions or deployment environments of the certified product, process or service
 - d) changes to key personnel responsible for the certified scope
 - e) changes to subcontractors, suppliers or third parties involved in delivering the certified scope
 - f) regulatory investigations, enforcement actions or legal proceedings that may affect the certified scope
 - g) any data breach, security incident or performance failure relevant to the certified scope

- 8.1.2 This notification obligation shall be reflected in the Certification Agreement as a mandatory scheme provision under Section 6.10.

Administrative amendments

- 8.1.3 Where a notified change is administrative in nature - involving no material change to the certified product, process or service, its technology, performance, scope or regulatory position - the Participating CAB may process the change as an administrative amendment without conducting a formal evaluation activity. Administrative amendments may include changes to the Certification Client's name, address, key contact details or branding.
- 8.1.4 The Participating CAB shall assess whether the notified change is truly administrative or whether it requires evaluation as a change affecting certification under Section 8.1.6. That assessment shall be documented.



8.1.5 Where an administrative amendment is approved, the Participating CAB shall:

- a) issue a revised Schedule of Certification reflecting the change
- b) notify the Scheme Owner so that the public registry may be updated
- c) record the amendment in the certification file

Changes requiring evaluation

8.1.6 Where a notified change is not administrative - or where an administrative amendment assessment determines that evaluation is required - the Participating CAB shall determine the appropriate evaluation pathway having regard to the nature and extent of the change. This may include:

- a) a targeted evaluation of the changed element only - where the change is limited in scope and its impact on other certified elements can be assessed without full re-evaluation
- b) an extension of scope evaluation under Section 6.21 - where the change involves the addition of new products, processes, services, technology types, jurisdictions or contexts of use
- c) a full re-evaluation - where the change is sufficiently fundamental that confidence in the existing certification can only be maintained through comprehensive re-assessment

8.1.7 The Participating CAB should notify the Certification Client of the determined evaluation pathway and the implications for the current certificate before evaluation commences.

8.2 Changes Arising Other than from the Certification Client

Sources of change

8.2.1 Changes affecting certification may arise from sources other than the Certification Client, including:

- a) amendments to the applicable scheme-specific document or these Rules
- b) amendments to normative standards referenced in the applicable scheme-specific document
- c) changes to applicable legislation, regulatory guidance or regulatory decisions
- d) complaints received about a Certification Client's certified product, process or service
- e) horizon scanning findings - including new research, technical developments, journalistic findings or third-party test results - that raise questions about the continued validity of existing certifications

- 
- f) automated monitoring outputs under Section 6.20.6-6.20.7 that indicate performance concerns

Scheme changes - Scheme Owner obligations

- 8.2.2 Where the Scheme Owner amends the applicable scheme-specific document or these Rules in a manner that affects existing certifications, the Scheme Owner shall:
- a) assess the impact of the change on current certifications and determine an appropriate transition period
 - b) communicate the change to all Participating CABs and registered ATLs with sufficient notice to enable them to plan the necessary evaluation activities
 - c) where required, obtain regulatory approval before implementing the change - in particular for changes to ACCS 2 and ACCS 3 which require ICO approval under Section 2.3
 - d) specify in the change notification whether existing certifications require re-evaluation, targeted assessment or administrative update to reflect the change

Communication to Certification Clients

- 8.2.3 Where a scheme change requires action by Certification Clients, the Participating CAB shall communicate the change to each affected Certification Client, confirming:
- a) the nature of the change and its effective date
 - b) the action required by the Certification Client
 - c) the timescale for compliance
 - d) the consequences of failing to implement the required changes within the specified timescale.
- 8.2.4 The Participating CAB shall verify implementation of required changes by Certification Clients through evaluation activities appropriate to the nature of the change. Verification shall be documented.

Scheme withdrawal

- 8.2.5 Where the Scheme Owner determines that an ACCS scheme must be withdrawn from the market, the Scheme Owner shall give not less than six months' notice to all Participating CABs, registered ATLs and Certification Clients. During the notice period:
- a) no new certifications shall be granted under the withdrawn scheme
 - b) existing certifications shall remain valid until their expiry date or the end of the notice period, whichever is earlier
 - c) the Scheme Owner shall notify any relevant regulatory authorities of the scheme withdrawal and its effective date



GUIDANCE NOTE: Scheme withdrawal is a last resort and would only occur in exceptional circumstances - for example where the normative standard on which the scheme is based is withdrawn without replacement, or where a regulatory decision makes continued operation of the scheme impossible. The six-month notice period is intended to give Certification Clients sufficient time to seek alternative certification or to communicate the change to their own customers and regulators.

8.3 Nonconformities Identified During Period of Certification

Sources and identification

- 8.3.1 Nonconformities during the period of certification may be identified through any of the following:
- a) surveillance audit activities under Section 6.20
 - b) automated monitoring outputs under Section 6.20.6-6.20.7
 - c) complaints received from any source - including consumers, relying parties, regulators or competitors
 - d) horizon scanning - including regulatory decisions, research findings, journalistic investigation or third-party testing
 - e) self-notification by the Certification Client
 - f) any other means by which objective evidence of non-fulfilment of scheme requirements comes to the attention of the Participating CAB or the Scheme Owner.

Examples of nonconformities during certification

- 8.3.2 Without limiting the generality of Section 8.3.1, nonconformities during certification may include:
- a) failure of the certified product, process or service to perform at the certified classification accuracy level
 - b) evidence - from any source, including third-party testing, journalistic investigation or relying party feedback - indicating that the certified system's performance does not match the certified level
 - c) refusal to accommodate surveillance audits or automated monitoring activities required under the scheme
 - d) failure to notify the Participating CAB of changes affecting certification in accordance with Section 8.1.1
 - e) failure to resolve nonconformities within the required timescales under Section 6.17.2
 - f) misuse of the certification mark - including use beyond the certified scope, use following suspension or expiry, or use inconsistent with the mark use requirements of Section 4 and ACCS-P03
 - g) making false or misleading claims about the certified scope or certification status
 - h) failure to pay fees due to the Participating CAB within the agreed timescales under the Certification Agreement

- 
- i) breach of the Certification Client's duty of candour to the scheme - including failure to disclose material information relevant to the certified scope or certification status
 - j) any confirmed sanctions designation, regulatory enforcement action or legal prohibition that prevents the continued provision of certification services under Section 6.8

Initial assessment

- 8.3.3 On identifying or receiving information about a potential nonconformity during the period of certification, the Participating CAB should:
- a) assess whether the information constitutes or indicates a potential nonconformity - distinguishing between confirmed nonconformities, alleged nonconformities requiring investigation, and matters that do not indicate a nonconformity
 - b) determine the appropriate initial response - which may include requesting information from the Certification Client, conducting a targeted evaluation activity, initiating a complaint handling process under Section 9.5, or proceeding directly to the Mind to Take Action process under Section 8.4
 - c) document the initial assessment and the determined response
- 8.3.4 Where a potential nonconformity is indicated by a complaint, the complaint should also be handled in accordance with Section 9 (Complaints and Appeals).

8.4 Mind to Take Action

- 8.4.1 The Mind to Take Action process provides a structured mechanism for the Participating CAB to notify a Certification Client that it is considering taking enforcement action in respect of an identified nonconformity, while giving the Certification Client a defined opportunity to respond and rectify the matter before a final decision is made.
- 8.4.2 The Participating CAB may issue a Mind to Take Action notice where:
- a) a nonconformity has been identified during the period of certification and the Participating CAB is considering one or more of the enforcement actions described in Section 8.4.7
 - b) a Major Nonconformity has not been closed within the timescale required by Section 6.17.2
 - c) a pattern of Minor Nonconformities indicates a systemic failure that the Participating CAB considers warrants escalation to the Mind to Take Action process



Content of the Minded to Take Action notice

- 8.4.3 The Minded to Take Action notice may set out in writing:
- a) the nonconformity or nonconformities identified - including the evidence on which each is based
 - b) the enforcement action or actions the Participating CAB is minded to take
 - c) the basis in these Rules for the proposed action
 - d) the action required from the Certification Client to avoid the proposed enforcement action
 - e) the timescale within which the Certification Client must respond - which should be reasonable having regard to the nature of the nonconformity and the proposed action, and should not normally be less than 10 working days
 - f) the Certification Client's right to make representations before a final decision is made

Decision following Minded to Take Action

- 8.4.4 Following receipt of the Certification Client's response - or on expiry of the response period without response - the Certification Decision Maker shall review the response and determine one of the following outcomes:
- a) **No further action** - the Certification Client's response has resolved the nonconformity to the Certification Decision Maker's satisfaction and no enforcement action is required
 - b) **Monitor at next surveillance** - the nonconformity has been partially addressed and will be assessed at the next scheduled surveillance activity
 - c) **Proceed to enforcement action** - the Certification Client's response has not resolved the nonconformity and one or more of the enforcement actions in Section 8.4.7 can be taken
 - d) **Refer to Scheme Owner** - where the matter raises issues of scheme interpretation, regulatory significance or scheme integrity that warrant Scheme Owner involvement before a final decision is made
- 8.4.5 The outcome shall be documented and communicated to the Certification Client in writing.
- 8.4.6 Where a nonconformity has been substantiated - whether through the Minded to Take Action process or directly - the Certification Decision Maker may determine the appropriate enforcement action, which may include any one or more of:
- a) **Continuation of certification under conditions** - certification continues but subject to enhanced monitoring, submission of additional evidence



of conformity, or other conditions specified in writing by the Certification Decision Maker

- b) **Reduction of scope** - the scope of certification is reduced to remove nonconforming products, processes, service variants or contexts of use. A reduction of scope should not result in the remaining certified scope giving a misleading impression of the Certification Client's overall position
- c) **Reduction of classification accuracy level** - where evidence indicates that the Certification Client's system no longer performs at the certified classification accuracy level, the certified level may be reduced to the level demonstrated by current evidence
- d) **Suspension of certification** - certification is temporarily suspended pending remedial action by the Certification Client
- e) **Withdrawal of certification** - certification is permanently withdrawn. The Certification Client shall cease all use of the certification mark and the certificate shall be cancelled

- 8.4.7 The Certification Decision Maker should select the enforcement action that is proportionate to the nature and severity of the nonconformity, having regard to the Certification Client's compliance history and the risk to consumers, relying parties and the integrity of the scheme.

8.5 Suspension of Certification

8.5.1 On suspension of certification:

- a) the Certification Client shall cease all use of the Certificate of Conformity as evidence of current certified status with immediate effect
- b) the Certification Client shall cease all use of the certification mark with immediate effect, in accordance with ACCS-P03
- c) the Participating CAB shall notify the Scheme Owner within 2 working days so that the public registry may be updated to reflect the suspended status
- d) the Participating CAB shall issue a certification bulletin to relevant regulatory authorities notifying them of the suspension - including the ICO for ACCS 2 and ACCS 3 certifications
- e) the Participating CAB shall communicate to the Certification Client the specific actions required to end suspension and the timescale within which they must be completed

- 8.5.2 Suspension shall not be open-ended. The Participating CAB shall specify at the point of suspension the timescale within which the required actions must be completed and the criteria that must be met for suspension to be lifted. Where those criteria are not met within the specified timescale, the Participating CAB shall consider withdrawal of certification.

- 
- 8.5.3 Where the Certification Client completes the required actions to the satisfaction of the Certification Decision Maker, certification may be reinstated. Reinstatement should follow the same evaluation, review and decision process as initial certification, proportionate to the nature of the nonconformity that led to suspension. The Participating CAB shall notify the Scheme Owner of reinstatement within 2 working days so that the public registry may be updated.

8.6 Withdrawal and Termination of Certification

Withdrawal of Certification by the Participating CAB

- 8.6.1 Where certification is withdrawn by the Participating CAB following substantiated nonconformity, the Participating CAB shall:
- cancel the Certificate of Conformity
 - notify the Scheme Owner within 2 working days so that the public registry is updated - the Certification Client's listing shall be moved to the historical record as withdrawn, with the date of withdrawal recorded
 - take all reasonable steps to ensure that indications of certification are removed - including working with the Certification Client to remove references from their website, promotional materials and any third-party sources such as trade associations, regulators or consumer information services
 - revoke authorisation for use of the certification mark
 - issue a certification bulletin to relevant regulatory authorities - including the ICO for ACCS 2 and ACCS 3 certifications

Termination by the Certification Client

- 8.6.2 Where the Certification Client requests termination of certification, the Participating CAB shall process the termination and apply the same consequences as withdrawal under Section 8.6.1.

Reduction of scope

- 8.6.3 Where certification is reduced in scope rather than fully withdrawn, the Participating CAB shall:
- issue a revised Certificate of Conformity and Schedule of Certification reflecting the reduced scope
 - notify the Scheme Owner within 2 working days so that the public registry may be updated
 - ensure that the Certification Client's use of the certification mark is adjusted to reflect the reduced scope in accordance with ACCS-P03

- 
- d) issue a certification bulletin to relevant regulatory authorities where the reduction affects a regulatory notification previously made

Change of legal entity

- 8.6.4 Where a Certification Client undergoes a change of legal entity - including merger, acquisition, demerger, name change or change of company number - the Participating CAB should assess the impact of the change on the certified scope and determine whether:
 - a) the certification may be transferred to the new legal entity following an administrative review - where the change does not materially affect the certified scope or the basis on which certification was granted
 - b) new certification evaluation is required - where the change affects the ownership, control, technology or scope of the certified product, process or service
- 8.6.5 The assessment shall be documented. Where certification is transferred to a new legal entity, the Participating CAB shall issue a revised Certificate of Conformity and notify the Scheme Owner so that the public registry may be updated. A new Certification Agreement is required. The old Certification Agreement may not be subject to novation.

8.7 Voluntary Transfer of Certification Between Participating CABs

Right to transfer

- 8.7.1 A Certification Client may elect to transfer responsibility for their certification from one Participating CAB to another at any time during the certification period, subject to the transfer procedure set out in this section. The right to transfer is a fundamental principle of the scheme - a Participating CAB shall not impose conditions on a Certification Client's departure that are designed to prevent or discourage transfer.
- 8.7.2 The Certification Client may select any Participating CAB or CAB Applicant to transfer to at any stage in the Certification Lifecycle.

GUIDANCE NOTE: The right to transfer reflects the ISO/IEC 17065 principle that certification services must be accessible and that access should not be conditional on factors unrelated to certification requirements. A Certification Client may have legitimate commercial, operational or governance reasons for wishing to change their CAB. Those reasons are not a matter for the scheme - the scheme's interest is in ensuring that the transfer is conducted in a way that maintains the integrity of the certification.

Obligations of the departing CAB

- 8.7.3 On receipt of a transfer notification, the departing CAB shall:
 - a) acknowledge the notification within 5 working days

- 
- b) compile a complete transfer package within 15 working days of the notification, comprising:
 - a. the complete evaluation record - including Stage One and Stage Two audit reports, test reports, the Evaluation Review record and the certification decision record
 - b. all surveillance records from the period of certification to date
 - c. all nonconformity records - including open nonconformities, their current status and any corrective action plans in place
 - d. the current Schedule of Certification and Practice Statements
 - e. the records of all changes affecting certification and their outcomes
 - f. any other records relevant to the certification that the receiving CAB would reasonably require to discharge its surveillance and oversight obligations
 - c) provide the transfer package to the receiving CAB and to the Scheme Owner within the 15 working day period
 - d) cooperate with any reasonable requests from the receiving CAB for clarification of matters arising from the evaluation record
 - e) not conduct any further evaluation, surveillance or enforcement activities in respect of the transferring Certification Client after the transfer date, except where specifically agreed with the receiving CAB

8.7.4 The departing CAB shall not impose any financial conditions on the transfer of certification records beyond recovery of reasonable costs of compiling the transfer package.

Open nonconformities at transfer

- 8.7.5 Where there are open nonconformities at the point of transfer:
- a) the departing CAB shall provide a full written record of each open nonconformity - including the finding, the evidence, the required corrective action and the timescale for closure - as part of the transfer package
 - b) the receiving CAB shall review each open nonconformity and confirm in writing to the Certification Client whether it accepts the finding, requires additional evidence before accepting it, or disputes it
 - c) where the receiving CAB disputes a finding made by the departing CAB, it shall notify the Scheme Owner
 - d) open nonconformities accepted or confirmed by the receiving CAB shall be managed from the transfer date in accordance with the timescales and requirements of Sections 6.17.2

- 
- e) the transfer shall not be used to extinguish legitimate open nonconformities - a Certification Client cannot transfer to a new CAB as a mechanism for avoiding the consequences of identified nonconformities

GUIDANCE NOTE: Section 8.7.5(e) addresses the "shopping for a better result" risk directly. Where a Certification Client seeks to transfer at a point when significant nonconformities have been identified - particularly where a Minded to Take Action notice has been issued - the Scheme Owner should consider whether the transfer is being sought in good faith or as a mechanism for avoiding enforcement action. Where the Scheme Owner considers the latter to be the case, it may impose conditions on the transfer or refer the matter to the receiving CAB for consideration before accepting the transfer.

- 8.7.6 Before accepting responsibility for the transferred certification, the receiving CAB should conduct a transfer assessment to confirm:
 - a) that it has the competence and capacity to take on the transferred certification, including competence in the applicable scheme-specific document and any technical domains covered by the certified scope
 - b) that the transfer package provided by the departing CAB is complete and adequate
 - c) that the evaluation record is sufficient to give the receiving CAB reasonable confidence in the basis on which certification was granted - the receiving CAB is not required to re-conduct the initial evaluation but must be satisfied that it was conducted adequately
 - d) that the receiving CAB is satisfied with the current status of open nonconformities and has a clear plan for managing them from the transfer date
 - e) that there are no impartiality conflicts that would prevent the receiving CAB from accepting the transfer
- 8.7.7 The transfer assessment should be documented. Where the receiving CAB identifies concerns about the adequacy of the original evaluation, it should notify the Scheme Owner before proceeding. In such cases, the receiving CAB may require a targeted re-evaluation of specific elements of the certified scope before accepting full responsibility for the certification.
- 8.7.8 The Scheme Owner should be notified of the transfer and shall:
 - a) update the public registry within 3 working days of the transfer date to reflect the change of responsible CAB
 - b) monitor the transfer process to ensure it is completed within the required timescales
 - c) intervene where the departing CAB fails to cooperate with the transfer process - in particular where the transfer package is not provided within the 15 working day period - by requiring compliance under the CAB Participation Agreement

- 
- d) determine any disputes arising from the transfer - including disputes about open nonconformities, the adequacy of the evaluation record or the costs of the transfer package

Continuity of certification

- 8.7.9 The transfer of certification from one Participating CAB to another does not affect the validity of the Certificate of Conformity or the certification period. The Certification Client's certification continues uninterrupted from the transfer date, subject to:
- a) the receiving CAB issuing a revised Certificate of Conformity in its own name, with the same certification period, scope and conditions as the transferred certificate
 - b) the receiving CAB issuing a revised Schedule of Certification identifying itself as the responsible CAB
 - c) the Scheme Owner updating the public registry to reflect the new responsible CAB

Levy at transfer

- 8.7.10 The Scheme Levy for surveillance and recertification activities conducted after the transfer date shall be payable by the receiving CAB to the Scheme Owner in accordance with ACCS-P04. No levy adjustment shall be made in respect of the transfer itself. The allocation of commercial fees between the departing and receiving CABs in respect of the transition period is a matter between those parties and the Certification Client and is not governed by these Rules.

8.8 Withdrawal of CAB Approval or Resignation of a Participant CAB

- 8.8.1 This section addresses the processes applicable where a Participating CAB ceases to participate in ACCS schemes - whether by decision of the Scheme Owner, by resignation of the Participating CAB, by loss of accreditation, or by reason of a change of legal entity. The primary concern in all cases is the protection of existing Certification Clients and the integrity of certificates already issued.

Withdrawal of CAB Approval by the Scheme Owner

- 8.8.2 The Scheme Owner may withdraw approval of a Participating CAB where:
- a) the Participating CAB loses its ISO/IEC 17065 accreditation covering ACCS schemes and does not reinstate it within the period specified in ACCS-P01

- 
- b) the Participating CAB commits a material breach of the CAB Participation Agreement that is not remedied within the timescale specified in a **Minded to Take Action** notice issued under ACCS-P01
 - c) the Participating CAB is subject to a confirmed sanctions designation or legal prohibition that prevents the continued provision of certification services under Section 6.8
 - d) the Participating CAB becomes insolvent, enters administration or ceases to trade
 - e) the Scheme Owner determines, following an oversight review under ACCS-P01, that the Participating CAB has conducted certification activities in a manner that has materially compromised the integrity of certifications issued under the scheme
 - f) any other ground specified in the CAB Participation Agreement

8.8.3 Except where immediate withdrawal is necessary to protect the integrity of the scheme or comply with a legal obligation - in particular under Section 8.8.2 (c) and (d) - the Scheme Owner should issue a **Minded to Take Action** notice to the Participating CAB before withdrawing approval, giving the CAB not less than 20 working days to respond and, where possible, to remedy the grounds for withdrawal.

8.8.4 The **Minded to Take Action** notice shall set out:

- a) the grounds for the proposed withdrawal
- b) the evidence on which those grounds are based
- c) where the grounds are capable of remedy, the specific actions required to avoid withdrawal and the timescale for completion
- d) the Participating CAB's right to make representations before a final decision is made

8.8.5 Where the Scheme Owner determines that immediate action is necessary to protect scheme integrity or Certification Clients, the Scheme Owner may suspend the Participating CAB's authority to issue new certifications or conduct new evaluation activities pending the outcome of the withdrawal process. Existing certificates shall not be affected by the interim suspension unless the Scheme Owner determines that their integrity has been compromised.

Resignation of a Participating CAB

8.8.6 A Participating CAB wishing to resign from the scheme shall give the Scheme Owner not less than six months' written notice of its intention to resign. The notice period shall be used to implement the transition arrangements described in Sections 8.8.10-8.8.15.



- 8.8.7 Where a Participating CAB resigns without giving the required notice period - including where it ceases to trade without notice - the Scheme Owner shall treat the resignation as effective from the date it comes to the Scheme Owner's attention and should implement the transition arrangements as soon as practicable.
- 8.8.8 Where a Participating CAB's ISO/IEC 17065 accreditation is suspended or withdrawn by their national accreditation body:
- a) the Participating CAB shall notify the Scheme Owner within 2 working days of being notified of the suspension or withdrawal
 - b) the Participating CAB shall immediately cease conducting new evaluation activities under ACCS schemes
 - c) existing certificates issued by the Participating CAB shall remain valid during an initial assessment period of not more than 30 days, during which the Scheme Owner shall assess the implications for those certificates
 - d) the Scheme Owner shall determine, within 30 days, whether the accreditation suspension or withdrawal requires immediate transition of Certification Clients or whether a longer transition period is appropriate
- 8.8.9 Where the Participating CAB's accreditation is reinstated within the period specified in ACCS-P01, the Scheme Owner may restore the CAB's authority to conduct scheme activities without requiring a full new admission process, subject to a review of any evaluation activities conducted during the accreditation gap.

Transition Arrangements - Protection of Certification Clients

- 8.8.10 Where a Participating CAB is to cease scheme participation for any reason, the Scheme Owner may implement transition arrangements to protect existing Certification Clients.
- 8.8.11 The Scheme Owner may notify all Certification Clients whose certificates were issued by the departing CAB of the situation and the transition arrangements, within 10 working days of the departure becoming confirmed. The notification should:
- a) explain the reason for the CAB's departure in terms appropriate to the circumstances - without disclosing confidential or legally sensitive information
 - b) confirm the current status of their certificate - whether it remains valid during the transition period
 - c) explain the transition options available to them
 - d) specify the timescale within which they must take action

- 
- 8.8.12 Where another Participating CAB agrees to accept transfer of certification responsibilities, the Scheme Owner may assist to facilitate the transfer. The transfer process should include:
- a) transfer of all certification records - including the evaluation record, surveillance records, nonconformity records and the current Schedule of Certification - from the departing CAB to the receiving CAB
 - b) confirmation by the receiving CAB that it has the competence and capacity to take on the transferred certifications
 - c) a competence assessment by the receiving CAB of each transferred certification - reviewing the evaluation record to confirm that the certification was properly conducted and that the receiving CAB is satisfied with the basis on which it was granted
 - d) issue of revised Certificates of Conformity by the receiving CAB where it is satisfied with the transferred certification, identifying the receiving CAB as the issuing body
 - e) notification to the Scheme Owner of each transferred certification so that the public registry may be updated
- 8.8.13 Where the receiving CAB's competence assessment identifies concerns about the adequacy of the original evaluation, the receiving CAB may require a targeted re-evaluation before accepting responsibility for the transferred certification.
- 8.8.14 Existing certificates shall remain valid during the transition period, which shall not normally exceed six months from the date of the Scheme Owner's notification to Certification Clients. During the transition period:
- a) the Scheme Owner may act as interim custodian of the certification records of the departing CAB
 - b) existing certificates may remain listed on the public registry as valid, with a notation indicating that the certification is under transition
 - c) no new surveillance activities should be conducted under the departing CAB's authority during the transition period
 - d) Certification Clients whose certifications have not been transferred or re-certified by the end of the transition period may be treated as holding expired certificates at the end of the transition period
- GUIDANCE NOTE: The transition period is intended to protect Certification Clients from losing certified status through no fault of their own. The Scheme Owner's role as interim custodian during the transition period does not make the Scheme Owner responsible for the technical validity of certificates issued by the departing CAB - it is an administrative role to preserve the certification record and facilitate transfer. Certification Clients should take prompt action during the transition period to arrange transfer to a new CAB or to initiate re-certification.*
- 8.8.15 Where a Certification Client whose certificate was issued by the departing CAB applies to a new Participating CAB for re-certification during or following the transition period, the new CAB may take into account the



evaluation records from the departing CAB's certification in scoping the re-certification evaluation, subject to:

- a) a currency assessment confirming that the evaluation records remain materially current
- b) the new CAB being satisfied as to the adequacy and integrity of the original evaluation
- c) the same provisions applying as for stalled recertification under Section 6.20.18

Certificates Compromised by CAB Misconduct

- 8.8.16 Where the Scheme Owner determines - following an investigation under ACCS-P01 - that certificates issued by a departing or sanctioned CAB were granted in circumstances that compromise their integrity, the Scheme Owner shall:
- a) notify the affected Certification Clients of the concern and the evidence on which it is based
 - b) give the affected Certification Clients an opportunity to make representations before any action is taken affecting their certification status
 - c) determine on a case-by-case basis whether each affected certificate should be:
 - a. maintained pending re-evaluation by a new CAB within a defined timescale
 - b. suspended pending re-evaluation
 - c. withdrawn where the evidence of integrity failure is compelling and cannot be remedied
 - d) notify relevant regulatory authorities - including the ICO for ACCS 2 and ACCS 3 certifications - of any certificates that have been suspended or withdrawn as a result of CAB misconduct
 - e) refer the matter to UKAS where the CAB misconduct may constitute a failure of the CAB's ISO/IEC 17065 obligations

GUIDANCE NOTE: The provisions of this clause are a last resort. The Scheme Owner's strong preference is always to protect the Certification Client's certified status through transfer rather than suspension or withdrawal. Suspension or withdrawal of a certificate because of the issuing CAB's misconduct - rather than the Certification Client's own nonconformity - is a serious step that should only be taken where the evidence of integrity failure is compelling and where maintaining the certificate would undermine public confidence in the scheme. The Certification Client's right to make representations before action is taken is an important safeguard.



8.9 Acquisition and Merger of a Participating CAB

- 8.9.1 Where a Participating CAB is acquired by, or merges with, another organisation, the Scheme Owner shall assess whether the acquisition or merger affects the CAB's:
- a) ISO/IEC 17065 accreditation - the Participating CAB shall notify their national accreditation body of the change in accordance with its accreditation obligations and notify the Scheme Owner of the outcome
 - b) impartiality - in particular where the acquiring organisation has interests in the age assurance market that could compromise the CAB's impartiality in making certification decisions
 - c) competence - whether the merged entity retains the personnel competence required under Section 5 of these Rules
 - d) compliance with the CAB Participation Agreement - whether the merged entity is willing and able to fulfil the obligations of the existing Participation Agreement
- 8.9.2 The Scheme Owner shall determine within 30 days of notification whether:
- a) the existing CAB Participation Agreement may continue with the merged entity without amendment
 - b) the CAB Participation Agreement requires amendment to reflect the changed entity
 - c) the merged entity must apply for a new admission under ACCS-P01
- 8.9.3 During the assessment period, existing certificates shall remain valid and the merged entity may continue to conduct scheme activities under the existing Participation Agreement, subject to any conditions imposed by the Scheme Owner.



9. Complaints and Appeals

9.1 Overview and public access

9.1.1 The Scheme Owner shall maintain a publicly accessible complaints and appeals process. Information about how to make a complaint or appeal, together with the applicable forms and procedures, shall be published on the scheme website and kept current.

9.1.2 The complaints and appeals process is operated in accordance with this section and the detailed procedures set out in ACCS-P05.

9.2 Categories of complaint and appeal

9.2.1 The scheme recognises four distinct categories of complaint and appeal, each governed by different procedures reflecting the nature of the issue and the parties involved:

- a) **Complaint against the service** Any expression of dissatisfaction by any person with the service provided by the Scheme Owner, a Participating CAB, a registered ATL, or any staff, contractors or subcontractors involved in scheme activities - excluding any certification decision made by a Certification Decision Maker
- b) **Complaint against a Certification Client** Any expression of dissatisfaction by any person about the conduct or behaviour of a Certification Client specifically related to the scope of their certification, their use of the certification mark, or conduct that has the potential to bring the scheme into disrepute
- c) **Appeal against a certification decision** Any challenge by a Certification Applicant or Certification Client to a certification decision made by a Certification Decision Maker - including decisions to refuse, defer, suspend, withdraw or reduce the scope of certification
- d) **Complaint about the scheme** Any expression of dissatisfaction by any person - including a Participating CAB, registered ATL, Certification Client, Certification Applicant, regulator, stakeholder or member of the public - about the design, governance, rules, policies or conduct of the Scheme Owner in its capacity as scheme owner, including:
 - i. the content or application of these Rules or any scheme-specific document
 - ii. the Scheme Owner's exercise of its oversight functions under ACCS-P01 or ACCS-P02
 - iii. the fairness, transparency or consistency of the scheme's governance arrangements

- 
- iv. alleged conflicts of interest or impartiality failures at scheme level
 - v. the Scheme Owner's conduct in relation to any matter affecting the integrity of the scheme

NOTE: Decisions made or positions adopted by auditors or technical evaluators are not subject to appeal until after they have been reviewed and a certification decision made by a Certification Decision Maker. However, the conduct of auditors or technical evaluators may give rise to a complaint against the service under category (a).

9.3 General principles applicable to all categories

9.3.1 The following principles apply across all categories of complaint and appeal:

- a) **Fairness** - all parties to a complaint or appeal should have a reasonable opportunity to present their position before a determination is made
- b) **Proportionality** - the resources and process applied to a complaint or appeal should be proportionate to its nature, complexity and potential impact
- c) **Timeliness** - complaints and appeals should be acknowledged and determined within the timescales specified in this section
- d) **Transparency** - the complainant or appellant should be kept informed of progress and receive a reasoned written determination
- e) **No detriment** - a Certification Client, Certification Applicant, Participating CAB or registered ATL should not suffer any detriment as a result of making a complaint or appeal in good faith

9.4 Complaints against the service of the Participating CAB or Registered ATL

9.4.1 Complaints against the service of either the Participating CAB or Registered ATL shall be dealt with in accordance with the documented process in ACCS-P05. A complaint may initially be addressed by the person responsible for the matter being complained about, where appropriate and where this is likely to lead to prompt resolution.

9.4.2 Where the complaint cannot be resolved at that level, it should be referred for independent review by a person not involved in the activity that gave rise to the complaint.

9.4.3 All complaints should be acknowledged in writing within 10 working days of receipt, identifying the person handling the complaint and the expected timescale for a response. A substantive response should be provided within 20 working days. Where this is not possible, the complainant should be provided with a progress report and a revised expected response date.

9.4.4 Where the complainant remains dissatisfied following the initial response, the complaint may be escalated to a senior officer of the Scheme Owner or Participating CAB as applicable - being a person who has not previously



been involved in handling the complaint. The escalating officer should acknowledge the escalation within 10 working days and provide a final response within 20 working days.

- 9.4.5 Where the complainant remains dissatisfied following escalation, and the complaint relates to the Scheme Owner's or a Participating CAB's service, the complainant may request independent mediation. The Scheme Owner may facilitate the appointment of an independent mediator through the Centre for Effective Dispute Resolution or equivalent independent body. The Participating CAB or Registered ATL complained about shall meet 50% of the cost of mediation. The Participating CAB or Registered ATL may, at its discretion, meet the remaining 50% of the cost where it determines that:
- a) the complaint is not frivolous or vexatious
 - b) the complainant is a private individual
 - c) the complaint raises a matter of genuine importance

9.5 Complaints against a Certification Client

- 9.5.1 All Certification Clients shall maintain their own publicly accessible complaints procedure for complaints relating to their certified product, process or service. Where a complaint is received by the Scheme Owner or a Participating CAB that relates to a Certification Client's conduct, the complainant may be directed to the Certification Client's own complaints process in the first instance.
- 9.5.2 Where the Certification Client's complaints process does not resolve the matter to the complainant's satisfaction, or where the complaint relates to mark misuse, misleading claims about certification status, or conduct that may affect the integrity of the scheme, the Participating CAB should investigate the complaint under its complaints procedure.
- 9.5.3 The Participating CAB's investigation can determine whether the complaint indicates a nonconformity with scheme requirements. Where a nonconformity is identified, it should be managed in accordance with Section 8.3.
- 9.5.4 A record of all complaints made against a Certification Client shall be maintained by the Participating CAB and made available to the Scheme Owner on request. Patterns of complaints against a Certification Client may be taken into account in surveillance planning under Section 6.20.

9.6 Appeals against certification decisions

- 9.6.1 A Certification Applicant or Certification Client may appeal against any certification decision made by a Certification Decision Maker - including decisions to refuse, defer, suspend, withdraw or reduce the scope of certification. An appeal may not be made against a Mind to Take Action



notice until a final certification decision has been made following that notice.

9.6.2 An appeal should first be referred to the Certification Decision Maker who made the decision under appeal, for consideration of whether new information or objective evidence disclosed in the appeal could cause that decision to be revised. The Certification Decision Maker shall respond within 10 working days. Where the Certification Decision Maker revises the decision, no further appeal process is required unless the appellant remains dissatisfied with the revised decision.

9.6.3 Where the Certification Decision Maker does not revise the decision, the appeal may be referred to a senior person within the Participating CAB who was not involved in the original decision. That person shall acknowledge the appeal within 10 working days and provide a determination within 20 working days.

9.6.4 Where the appellant remains dissatisfied with the review by the Certification Decision Maker, the appeal shall be dealt with in accordance with the Appeals Process established by the Participating CAB in accordance with their ISO/IEC 17065 accreditation.

9.6.5 Where the appellant remains dissatisfied following exhausting the Participating CAB's appeals process, the appellant may refer the appeal to the Scheme's Appeals Panel. The Appeals Panel shall:

- a) comprise members with appropriate industry or technical competence in the relevant subject matter
- b) be independent of the Scheme Owner, the Participating CAB and the appellant
- c) consider only the evidence available to the Certification Decision Maker at the time of the original decision - where additional evidence is submitted, the Panel may remit the matter to the Certification Decision Maker for re-evaluation
- d) make its determination by majority decision, with reasons

9.6.6 The Appeals Panel may:

- a) uphold the original certification decision
- b) remit the decision to the Certification Decision Maker with recommendations to obtain or consider additional evidence

NOTE: The Appeals Panel cannot revoke the decision taken by the Certification Decision Maker as the Participating CAB is required to maintain sovereign ownership of certification decisions.

9.6.7 The determination of the Appeals Panel on the merits of the appeal shall be final within the scheme's internal processes. It does not affect any right of



the appellant to seek external recourse through regulatory or legal channels.

- 9.6.8 All appeals shall be acknowledged in writing within 10 working days of receipt. A determination at each stage shall be provided within 20 working days. Where this is not possible, the appellant should be provided with a progress report and a revised expected determination date.

9.7 Complaints about the scheme

- 9.7.1 A complaint about the scheme is a complaint about the Scheme Owner's exercise of its functions as scheme owner - as distinct from a complaint about the service provided by a Participating CAB or the conduct of a Certification Client. Because the Scheme Owner is potentially the subject of such a complaint, the handling of scheme complaints requires independent oversight that the standard complaints process cannot provide.

- 9.7.2 A scheme complaint may be made by any person with a legitimate interest in the operation of the scheme, including:
- a) a Participating CAB or CAB Applicant
 - b) a registered ATL or ATL Applicant
 - c) a Certification Client or Certification Applicant
 - d) a regulatory authority with an interest in the scheme
 - e) a recognised stakeholder body
 - f) any member of the public with reasonable grounds for concern about the scheme's governance or operation

- 9.7.3 A scheme complaint may relate to:
- a) the content of these Rules or any scheme-specific document - including whether a rule is unclear, inconsistent, disproportionate or inconsistent with applicable law or accreditation requirements
 - b) the Scheme Owner's application or interpretation of these Rules in a specific case
 - c) the fairness, transparency or consistency of the scheme's governance arrangements
 - d) alleged conflicts of interest or impartiality failures at scheme level - including in relation to the Scheme Owner's relationship with Participating CABs or Certification Clients
 - e) the Scheme Owner's conduct in exercising its oversight functions under ACCS-P01 or ACCS-P02
 - f) the Scheme Owner's conduct in the provisional CAB review process under Section 6.19.14-6.19.15

- 
- g) any other matter relating to the Scheme Owner's governance of the scheme that raises a genuine concern about scheme integrity, fairness or compliance with applicable requirements

- 9.7.4 A scheme complaint should be submitted to the Scheme Owner in writing. On receipt, the Scheme Owner should:
- a) acknowledge the complaint within 5 working days
 - b) assess whether the complaint falls within the scope of scheme complaints under this section or whether it should be handled under another category
 - c) appoint a person to handle the complaint who is independent of the matter complained about - where the complaint concerns the conduct of the Scheme Owner's senior personnel, this person may be a member of the Scheme Owner's Impartiality Panel under Section 11.4
 - d) provide an initial response within 20 working days, setting out the Scheme Owner's position on the complaint and any action proposed

- 9.7.5 Where a scheme complaint:
- a) alleges a conflict of interest or impartiality failure at scheme level
 - b) concerns the Scheme Owner's conduct in the provisional CAB review process
 - c) is made by a Participating CAB, registered ATL or regulatory authority
 - d) raises a matter that the Scheme Owner's initial assessment identifies as having potential significance for scheme integrity

the complaint should be referred to the Scheme Owner's Impartiality Panel for independent review.

- 9.7.6 The Scheme Owner shall respond to the complainant within 10 working days of receiving the Impartiality Panel's findings, setting out what action the Scheme Owner proposes to take in response and the reasons for any departure from the Panel's recommendations.

- 9.7.7 Where a scheme complaint relates to ACCS 2 or ACCS 3 and raises concerns about the scheme's compliance with the ICO's certification framework requirements, the Scheme Owner shall notify the ICO of the complaint and its outcome in accordance with the ICO's approved scheme requirements.

GUIDANCE NOTE: The scheme complaints process is an important accountability mechanism - it provides a formal route for those affected by the scheme's governance to raise concerns and have them independently considered. The referral route to the Impartiality Panel, UKAS and the ICO means that scheme complaints are not resolved exclusively by the Scheme Owner in its own interest. Participating CABs, Certification Clients and regulatory bodies should be made aware of the scheme complaints process at the point of admission, certification and regulatory approval respectively.



10. Records

10.1 General Obligation

10.1.1 The Scheme Owner, all Participating CABs and all registered ATLs shall maintain records sufficient to demonstrate compliance with these Rules, the applicable scheme-specific document and their respective obligations under ISO/IEC 17065. Records shall be maintained in a manner that ensures their:

- a) **integrity** - records shall be accurate, complete and protected against unauthorised alteration
- b) **security** - records shall be protected against unauthorised access, loss or destruction
- c) **accessibility** - records shall be retrievable within a reasonable time in response to legitimate requests from the Scheme Owner, UKAS or relevant regulatory authorities
- d) **confidentiality** - records containing commercially sensitive, personally identifiable or otherwise confidential information shall be subject to appropriate access controls
- e) **legibility** - records shall be maintained in a form that is readable and understandable by a person with appropriate technical knowledge who was not involved in creating them

10.2 Certification Records - Participant CABs

10.2.1 A Participating CAB shall maintain a complete certification record for each Certification Client, comprising:

- a) the application and application review record - including the sanctions, PEP and adverse media screening record under Section 6.8
- b) the initial call and scoping record
- c) the Certification Agreement
- d) all evaluation planning records - including audit plans and test plans
- e) the Stage One evaluation record - including all Stage One findings, documentary gap records and the Stage One Quality Assurance Review record
- f) all test reports produced by a registered ATL or the CAB's own testing function
- g) the Stage Two audit report - including the auditor's certification recommendation
- h) the Evaluation Review record
- i) the certification decision record - including the Certification Decision Maker's determination and the basis for it

- 
- j) the Certificate of Conformity, Schedule of Certification and Practice Statements issued
 - k) all surveillance records - including surveillance plans, surveillance audit reports, surveillance evaluation reviews and post-surveillance certification records
 - l) all nonconformity records - including the finding, categorisation, corrective action plan, closure evidence and verification
 - m) all records of changes affecting certification - including administrative amendments, scope extensions and changes affecting certification arising from other sources
 - n) all Mind to Take Action records and enforcement decisions
 - o) all complaints and appeals records relating to the Certification Client
 - p) transfer records - where the certification has been transferred to or from another Participating CAB
 - q) termination, suspension, withdrawal or expiry records

- 10.2.2 Certification records shall be retained for a minimum of:
- a) for records relating to a current certification - for the duration of the certification period and for not less than 6 years following the expiry, withdrawal or termination of certification
 - b) for records relating to a certification that was refused - for not less than 6 years from the date of the refusal decision
 - c) for sanctions and PEP screening records - for not less than 6 years from the end of the client relationship, regardless of whether certification was granted

- 10.2.3 At the end of the applicable retention period, records should be destroyed in accordance with the Participating CAB's information governance and data protection procedures.

10.3 Scheme Oversight Records - Scheme Owner

- 10.3.1 The Scheme Owner shall maintain records of scheme oversight activities, including:
- a) CAB admission records - including CAB Applicant assessments, admission decisions, Participation Agreements and ongoing oversight reviews
 - b) ATL registration records - including ATL Applicant assessments, registration decisions, Registration Agreements and ongoing oversight reviews
 - c) levy notification records - including all notifications received under Sections 6.19.14-6.19.15, and the corresponding levy invoices

- 
- d) provisional CAB review records - including all pre-decision notifications, Scheme Owner responses and the records of any concerns raised under Section 6.19.14-6.19.15
 - e) impartiality records - including Impartiality Panel proceedings, declarations of interest and decisions
 - f) stakeholder consultation records - including consultation papers, responses received and the Scheme Owner's analysis of responses
 - g) scheme change records - including the evidence base for scheme changes, transition arrangements and regulatory notifications
 - h) novel application records - including notifications received under Section 6.9 and any guidance issued in response

10.3.2 Scheme oversight records shall be retained for a minimum of 6 years from the date of creation.

10.4 Registry Records - Scheme Owner

10.4.1 A historical record of certifications that have expired, been withdrawn or otherwise terminated should be held for at least 6 years.

10.4.2 Where a record is amended - for example to reflect a change of certified scope, a name change or a transfer of certification - the previous version of the record should be preserved in an audit trail with the date and nature of the amendment recorded.

10.5 Complaints and Appeals Records

10.5.1 The Scheme Owner and each Participating CAB shall maintain records of all complaints and appeals handled under Section 9, including:

- a) the complaint or appeal as received
- b) the category assigned and the basis for that assignment
- c) the identity of the person or persons handling the complaint or appeal
- d) all correspondence, evidence and representations received
- e) the investigation record and findings
- f) the determination and the reasons for it
- g) any follow-up actions taken as a result of the determination

10.5.2 Complaints and appeals records shall be retained for a minimum of 6 years from the date of final determination.

10.5.3 The Scheme Owner may maintain an aggregated record of complaints and appeals by category, enabling patterns and trends to be identified for continuous improvement purposes. This aggregated record can be reviewed as part of the annual scheme review under ACCS-P06.



10.6 Personal Identifiable Information in Certification Records

- 10.6.1 Certification records shall not contain Personally Identifiable Information (PII) relating to members of the public who are the subjects of age check decisions made by Certification Clients, except where such information is directly necessary for the purpose of the certification activity and cannot be avoided.
- 10.6.2 Where an audit record includes reference numbers relevant to a process involving a member of the public - for example a transaction reference or case number - that shall not be treated as PII unless the record also contains other information enabling that reference to be linked to an identifiable individual.

10.7 Data Protection Compliance

- 10.7.1 All personal data processed in connection with certification activities - including information about Certification Client personnel, Certification Applicant officers and directors, and individuals identified through sanctions or PEP screening - shall be processed in accordance with applicable data protection legislation and the Participating CAB's and Scheme Owner's data protection policies.
- 10.7.2 Personal data held in certification records shall be subject to appropriate access controls and processed only for the purposes for which it was collected. Requests for access to personal data in certification records shall be handled in accordance with applicable data subject rights under data protection legislation.

GUIDANCE NOTE: The prohibition on PII in certification records reflects the fundamental principle that certification is about products, processes and services - not about individual consumers. A certification record that contains detailed personal information about members of the public who have used the certified service would be disproportionate and potentially unlawful. Auditors should be alert to this risk when reviewing transaction samples during evaluation or surveillance - reference numbers and anonymised transaction data are appropriate; personal details of individual consumers are not.

10.8 Access to Records

- 10.8.1 The Scheme Owner shall have the right to request access to and copies of certification records held by a Participating CAB or registered ATL for the purposes of:
- a) scheme oversight under ACCS-P01 or ACCS-P02
 - b) investigating a complaint or appeal under Section 9

- 
- c) verifying levy calculations under ACCS-P04
 - d) assessing the adequacy of a certification before the provisional CAB review process under Section 6.19.14-6.19.15
 - e) any other legitimate scheme governance purpose

10.8.2 A Participating CAB or registered ATL shall provide requested records within 10 working days of a request, subject to any applicable legal restrictions.

10.8.3 The relevant national accreditation body shall have access to certification records held by a Participating CAB in accordance with the CAB's ISO/IEC 17065 accreditation obligations.

10.8.4 Relevant regulatory authorities - including the ICO for ACCS 2 and ACCS 3 certifications - may have access to certification records in accordance with their statutory powers.

10.8.5 A Certification Client may have access to its own certification records held by the Participating CAB, subject to the exclusion of any information that is commercially confidential to the Participating CAB. On termination, withdrawal or expiry of certification, the Participating CAB shall provide the Certification Client with a copy of the certification record within 30 days of a request, unless there are legal grounds for withholding any element.

10.8.6 Where certification records are transferred between Participating CABs - whether on voluntary transfer or on involuntary transfer under Section 8.7 - the transferring CAB shall:

- a) provide a complete copy of the certification record to the receiving CAB within the timescales specified in the applicable transfer section
- b) retain the original certification record for the remainder of the applicable retention period under Section 10.2.2
- c) not destroy any certification record that has been transferred until the applicable retention period has expired, regardless of the transfer

10.8.7 The receiving CAB's retention obligations under Section 10.2.2 shall run from the original certification date - not from the transfer date.

10.9 ATL Records

10.9.1 A registered ATL shall maintain records of all testing activities conducted under ACCS schemes, including:

- a) the test plan for each testing activity
- b) raw test data and the methodology applied
- c) the test report issued to the engaging Participating CAB
- d) calibration and equipment records for testing equipment used
- e) competence records for personnel who conducted the testing

- f) any communications with the engaging Participating CAB about the testing activity

10.9.2 ATL records shall be retained for a minimum of 6 years from the date of the test report. Where a dispute arises about test results within the retention period, the relevant records shall be preserved until the dispute is resolved, even if the retention period has expired.





11. Impartiality

11.1 Commitment to Impartiality

- 11.1.1 The Scheme Owner is committed to ensuring that all certification activities conducted under ACCS schemes are performed impartially, independently and without conflicts of interest. The integrity of ACCS certification depends on public, regulatory and market confidence that certification decisions are made objectively on the evidence - free from commercial, financial, personal or institutional pressures.
- 11.1.2 The Scheme Owner's Impartiality and Independence Policy Statement is publicly available at on the scheme website.
- 11.1.3 This section establishes the impartiality framework applicable to:
- a) the Scheme Owner in its governance and oversight functions
 - b) Participating CABs in their certification activities
 - c) registered ATLs in their testing activities
 - d) all personnel performing functions under the scheme

11.2 Scheme Owner Impartiality - Relationship with Participating CABs

- 11.2.1 The Scheme Owner shall maintain its governance and oversight functions independently of the commercial interests of Participating CABs, registered ATLs and Certification Clients. The Scheme Owner shall not allow its financial interest in the Scheme Levy or its relationships with Participating CABs to influence its scheme governance decisions.
- 11.2.2 Where the Scheme Owner and a Participating CAB are commonly owned, under common control, or have a shared ownership structure - as may arise during the early stages of scheme development - the Scheme Owner shall implement enhanced impartiality arrangements to manage the conflicts of interest arising from that relationship. These shall include:
- a) **Separation of functions** - personnel performing scheme governance functions on behalf of the Scheme Owner - including scheme rule development, CAB oversight, levy administration and the provisional CAB review process under Section 6.19.14-6.19.15 - should be functionally separate from personnel performing certification activities on behalf of the associated Participating CAB
 - b) **Independent oversight** - the Scheme Owner's Impartiality Panel shall have an independent majority and provide active oversight of all scheme governance decisions that may be affected by the commonly owned relationship

- 
- c) **Declared relationship** - the Scheme Owner shall publicly disclose the nature of its relationship with any commonly owned or associated Participating CAB in its Impartiality and Independence Policy Statement and on the scheme website
 - d) **Independent review of provisional decisions** - where the Scheme Owner is required to review a proposed certification decision under Section 6.19.14-6.19.15 in respect of a commonly owned Participating CAB, the review shall be conducted by an independent reviewer who is not an employee, officer or contractor of either organisation, appointed under the Impartiality Panel's oversight

GUIDANCE NOTE: The requirement to disclose the commonly owned relationship publicly is an important transparency measure. Regulators, Certification Clients and the public are entitled to know about ownership relationships that could affect the scheme's governance. Disclosure does not imply that the relationship creates an actual conflict - it demonstrates that the Scheme Owner has identified the potential conflict and is managing it transparently.

11.3 Scheme Owner financial interests

- 11.3.1 The Scheme Owner shall not allow its financial interest in the Scheme Levy to influence:
 - a) decisions about the admission or withdrawal of approval of Participating CABs
 - b) the content of scheme rules or scheme-specific documents
 - c) the review of proposed certification decisions under Section 6.19.14-6.19.15
 - d) the handling of complaints and appeals under Section 9
- 11.3.2 The Impartiality Panel shall monitor the Scheme Owner's exercise of its financial governance functions.

11.4 Impartiality Panel

Composition

- 11.4.1 The Scheme Owner shall maintain an Impartiality Panel to provide independent oversight of scheme governance and certification activities.
- 11.4.2 Participating CABs may elect to use the Scheme Impartiality Panel as their impartiality mechanism or use an alternative impartiality mechanism in accordance with their own ISO/IEC 17065 accreditation.
- 11.4.3 The Impartiality Panel shall comprise:
 - a) **least three independent members** - persons with no employment, contracting, financial (save for a commercially appropriate fee for their



attendance and reasonable expenses) or ownership relationship with the Scheme Owner, any Participating CAB or any registered ATL, who has sufficient experience of conformity assessment, regulatory governance or a related field and collectively sufficient technical, legal, regulatory or commercial expertise to provide meaningful oversight of the scheme's activities

- b) **one non-voting Scheme Owner representative** - to provide information and context to the Panel but who shall not participate in Panel decisions

11.4.4 A person shall not be appointed to the Impartiality Panel where they:

- a) have a financial interest in the commercial success of the Scheme Owner or any Participating CAB
- b) have provided consultancy, advisory or other services to the Scheme Owner or any Participating CAB within the previous 3 years
- c) are a current Certification Client
- d) have any other relationship that could reasonably be perceived to affect their independence

Authority and functions

11.4.5 The Impartiality Panel has genuine oversight authority - it is not advisory only. Its functions include:

- a) reviewing and approving the Scheme Owner's Impartiality Risk Register and any material changes to it
- b) reviewing the Scheme Owner's impartiality arrangements periodically - not less than annually - and reporting findings to the Scheme Owner's board
- c) considering and determining complaints about the scheme under Section 9.7 where those complaints raise impartiality or conflict of interest concerns
- d) overseeing the appointment and conduct of independent reviewers under Section 6.19.14-6.19.15 where the Scheme Owner and a Participating CAB are commonly owned
- e) reviewing any situation identified by the Scheme Owner or brought to the Panel's attention where a conflict of interest may affect the integrity of a certification decision or scheme governance function
- f) reporting annually to stakeholders through the scheme's annual review report under ACCS-P06 on the operation of the impartiality framework

Panel proceedings

11.4.6 The Impartiality Panel shall meet not less than twice per year. Meetings may be held in person or remotely. A quorum shall comprise at least two independent members. Decisions of the Panel shall be by majority of



independent members present. The Panel may determine to elect a meeting or nominated independent member to act as a chair of proceedings. That person shall not have a casting vote.

- 11.4.7 The Scheme shall maintain records of the Panel's proceedings, findings and decisions. Those records may be made available to any national accreditation body on request as part of the scheme's governance records.

11.5 Impartiality Risk Register

- 11.5.1 The Scheme Owner shall maintain an Impartiality Risk Register as a working document identifying threats to impartiality arising from:

- a) the Scheme Owner's relationships - including its relationship with any commonly owned Participating CAB, its financial interests, and its relationships with regulators, standards bodies and industry associations
- b) Participating CAB relationships - including relationships between CABs and Certification Clients, between CABs and ATLs, and between CAB personnel and Certification Applicants
- c) personnel relationships - including prior employment, consultancy, personal relationships and financial interests
- d) structural factors - including the scheme's market position, the limited number of Participating CABs during the early stages of scheme development, and any factors that could create a dependency relationship between the Scheme Owner and a Participating CAB or Certification Client

- 11.5.2 The Impartiality Risk Register shall be:

- a) reviewed and updated by the Scheme Owner not less than annually
- b) reviewed by the Impartiality Panel not less than annually
- c) updated whenever a new threat is identified - including threats arising from new relationships, scheme changes or market developments
- d) made available to any national accreditation body on request

- 11.5.3 Where the Impartiality Risk Register identifies a threat that cannot be eliminated, the Scheme Owner shall document the controls in place to mitigate the threat and assess the residual risk. Where the residual risk is assessed as material, the Scheme Owner shall refer the matter to the Impartiality Panel for review.

11.6 Conflict of Interest - Declaration and Management

- 11.6.1 All personnel performing functions under ACCS schemes - including Scheme Owner personnel, CAB auditors, Evaluation Reviewers, Certification Decision Makers, ATL technical evaluators and Impartiality Panel members -



shall declare any conflict of interest before performing any function to which the conflict is relevant.

- 11.6.2 A conflict of interest exists where a person has a personal, financial, employment, consultancy or other relationship with a Certification Applicant, Certification Client or other party that could reasonably be perceived to affect their objectivity in performing the relevant function.
- 11.6.3 Declarations of interest shall be made in writing to the person's line manager or, in the case of Impartiality Panel members, to the other Panel members. The declaration shall identify:
- a) the nature of the relationship or interest
 - b) the person or organisation to whom it relates
 - c) the function in respect of which the conflict is declared
- 11.6.4 On receipt of a declaration of interest, the relevant manager or independent members should determine whether the conflict:
- a) **requires exclusion** - the person should not perform the relevant function and an alternative person should be appointed
 - b) **requires disclosure but not exclusion** - the conflict is declared on the record and the person may continue with appropriate oversight
 - c) **does not constitute a material conflict** - the declaration is noted and no further action is required
- 11.6.5 All declarations and determinations shall be documented and retained as part of the certification record or governance record as appropriate.

11.7 CAB Impartiality Obligations

- 11.7.1 A Participating CAB shall not conduct certification activities in circumstances where its impartiality is or could reasonably be perceived to be compromised. Without limiting the generality of this obligation, a Participating CAB shall not:
- a) certify a product, process or service that it has designed, developed, implemented, operated or maintained
 - b) certify a product, process or service in respect of which it has provided Consultancy as defined in Section 3.3.6 - the two-year restriction on consultancy providers in Section 11.7.3 applies at the level of the CAB as a whole where prohibited consultancy has been provided
 - c) certify a product, process or service where a member of the audit team has a personal or financial relationship with the Certification Applicant or Certification Client that could affect their objectivity
 - d) market or offer its certification services as linked with the activities of any organisation that provides consultancy



- e) state or imply to a Certification Applicant or Certification Client that the use of any particular consultancy organisation would make certification simpler, easier, faster or less expensive

- 11.7.2 Personnel of a Certification Client or Certification Applicant shall not be involved in the Participating CAB's management, evaluation review or certification decision functions in respect of any certification activity. A Participating CAB's employees shall not be Certification Clients of that CAB.
- 11.7.3 A person shall not perform an Evaluation Review or certification decision function in respect of a Certification Applicant or Certification Client for whom they have conducted certification activities, provided consultancy or been employed within the previous 2 years. This two-year restriction applies regardless of whether a formal conflict of interest has been declared.
- 11.7.4 A Participating CAB shall confine its evaluation, review, decision and monitoring activities to matters specifically related to the certified scope.
- 11.7.5 Access to certification services shall be available to all Certification Applicants whose activities fall within the scope of the applicable ACCS scheme. No application should be conditional upon the size of the Certification Applicant, membership of any association or group, or the number of certifications already issued. This obligation applies alongside and is consistent with the non-discrimination requirements of ISO/IEC 17065, 4.1.1 and 4.2, as noted in Section 6.8.8.

11.8 ATL Impartiality Obligations

- 11.8.1 A registered ATL shall maintain the same impartiality standards in its testing activities as a Participating CAB in its evaluation activities. In particular a registered ATL shall not:
- a) conduct testing of a product, process or service that it has designed, developed or implemented
 - b) conduct testing where a member of the testing team has a personal or financial relationship with the Certification Applicant or Certification Client that could affect their objectivity
 - c) disclose test results, test methodologies or test data to any party other than the engaging Participating CAB and the Scheme Owner without the prior written consent of the engaging Participating CAB



12. Confidentiality and Transparency

12.1 Commitment to Confidentiality and Transparency

12.1.1 This section addresses two complementary obligations that together define the information governance framework for the scheme:

- **Confidentiality** - the obligations of all parties to protect information obtained in connection with scheme activities
- **Transparency** - the obligations of the Scheme Owner to make certain information publicly available

12.1.2 These obligations apply alongside and are consistent with the confidentiality requirements of ISO/IEC 17065, which governs the confidentiality obligations of Participating CABs as part of their accreditation. This section does not duplicate those requirements - it addresses the scheme-level obligations that ISO/IEC 17065 does not cover, and extends equivalent obligations to the Scheme Owner and registered ATLs.

12.2 Confidentiality Obligations - Scheme Owner

12.2.1 The Scheme Owner shall treat as confidential all information it receives in connection with its scheme governance functions, including:

- a) **Certification records** - information provided by Participating CABs under the levy notification, Stage One QA Review notification and certification decision notification processes
- b) **CAB and ATL admission records** - information provided by CAB Applicants and ATL Applicants during the admission and registration process, including commercial, financial and technical information
- c) **Provisional CAB review information** - information provided under the pre-decision consultation process of Section 6.19.14-6.19.15, including the identity of the Certification Applicant and the content of the evaluation record
- d) **Complaints and appeals information** - information provided by complainants, appellants and respondents in the course of complaints and appeals handling
- e) **Impartiality Panel proceedings** - deliberations and records of the Impartiality Panel, subject to the Panel's own reporting obligations
- f) **Commercial information** - information about the commercial arrangements between Participating CABs and Certification Clients, including fee structures, commercial terms and audit timescales

- 
- 12.2.2 The Scheme Owner shall implement appropriate information governance arrangements to ensure that confidential information received in one governance capacity is not accessible to personnel acting in a different capacity - in particular, information received from one Participating CAB shall not be accessible to personnel acting in connection with another Participating CAB's activities.

GUIDANCE NOTE: The Scheme Owner's confidentiality obligations are particularly important given the commonly owned relationship between the Scheme Owner and AVID Certification Services. Information received by the Scheme Owner from other Participating CABs or their Certification Clients should not be accessible to AVID personnel acting in their CAB capacity. This requires appropriate information barriers within the Scheme Owner's governance arrangements.

12.3 Confidentiality Obligations - Participating CABs

- 12.3.1 A Participating CAB's confidentiality obligations in respect of certification activities are governed by ISO/IEC 17065, which requires the CAB to treat as confidential all information obtained or created during certification activities. Those obligations are incorporated into the scheme by reference and are not repeated here.
- 12.3.2 In addition to the ISO/IEC 17065 requirements, a Participating CAB shall:
- ensure that confidentiality obligations binding on the CAB are flowed down to all subcontractors, technical specialists and other persons engaged in certification activities on the CAB's behalf
 - not use information obtained from a Certification Client or Certification Applicant during certification activities for any purpose other than the certification activity for which it was obtained - in particular, a CAB shall not use insights gained from one client's certification to benefit a competitor client
 - maintain confidentiality of information about other Participating CABs and their certification activities that comes to the CAB's attention through scheme processes - including novel application consultations under Section 6.9, transfer processes under Section 8.7-8.8 and Impartiality Panel proceedings

12.4 Confidentiality Obligations - Registered ATLs

- 12.4.1 A registered ATL shall treat as confidential all information obtained in connection with testing activities conducted under ACCS schemes, including:
- the identity of the Certification Applicant or Certification Client on whose behalf testing is being conducted
 - the technical specifications, architecture and design of the product, process or service under test

- 
- c) test results, test data and the methodology applied
 - d) any other information about the Certification Client's systems, processes or commercial position obtained during the testing activity

12.4.2 A registered ATL shall not disclose test results, test methodologies or test data to any party other than the engaging Participating CAB and the Scheme Owner, without the prior written consent of the engaging Participating CAB. This obligation continues after the ATL's registration under the scheme has ended.

12.5 Permitted Disclosures

- 12.5.1 Notwithstanding the confidentiality obligations in Sections 12.2, 12.3 and 12.4, information may be disclosed in the following circumstances:
- a) **Consent** - where the Certification Applicant or Certification Client has provided written consent to the specific disclosure
 - b) **Public information** - where the information has been made publicly available by the Certification Applicant or Certification Client themselves
 - c) **Regulatory disclosure** - where disclosure is required by a regulatory authority with jurisdiction over the matter or where disclosure is required by law or court order. Unless prohibited by law, the disclosing party should notify the Certification Client of the disclosure and the information disclosed
 - d) **Accreditation body disclosure** - where disclosure to any Global ACI member accreditation body is required as part of the CAB's accreditation obligations or the Scheme Owner's scheme oversight obligations
 - e) **Transfer disclosure** - where information is disclosed to a receiving Participating CAB as part of a certification transfer under Sections 8.7-8.8, subject to the receiving CAB being bound by equivalent confidentiality obligations
 - f) **Scheme Owner oversight** - where information is disclosed to the Scheme Owner for the purposes of levy administration, scheme oversight or the provisional CAB review process under Section 6.19.14-6.19.15, subject to the Scheme Owner's confidentiality obligations under Section 12.2
 - g) **Complaints and appeals** - where disclosure is necessary for the proper handling of a complaint or appeal under Section 9, limited to the information necessary for that purpose
- 12.5.2 Where any permitted disclosure is made, the disclosing party shall maintain a record of what was disclosed, to whom, on what basis and when.



12.6 Integrity of Certification Reports and Decisions

- 12.6.1 Where a Certification Client or Certification Applicant discloses details of any certification report, evaluation record or certification decision to any third party - including for regulatory, commercial or marketing purposes - the disclosed information shall:
- a) be presented in full and not in a manner that is misleading by reason of omission or selective presentation
 - b) not be amended, redacted or re-characterised in a manner that changes its meaning or effect
 - c) clearly identify the Participating CAB that issued the report or made the decision and the date on which it did so
- 12.6.2 A Certification Client shall not use a partial extract from a certification report or evaluation record in a manner that creates a misleading impression of the scope or outcome of the certification.

12.7 Fair Competition Between Participating CABs and ATLs

- 12.7.1 The Scheme Owner shall administer the scheme in a manner that promotes fair and effective competition between Participating CABs and between registered ATLs. In particular the Scheme Owner shall:
- a) apply admission, oversight and levy requirements consistently to all Participating CABs and registered ATLs, without favouring any individual CAB or ATL
 - b) not disclose to one Participating CAB commercially sensitive information about another Participating CAB's certification activities, pricing, client relationships or business plans obtained through the Scheme Owner's governance functions
 - c) not disclose to one registered ATL commercially sensitive information about another ATL's testing methodologies, pricing or client relationships obtained through the Scheme Owner's governance functions
 - d) ensure that the Scheme Owner's own commercial interests - including its interest in the Scheme Levy - do not distort competition between Participating CABs
 - e) ensure that any commonly owned Participating CAB does not obtain a competitive advantage through access to scheme governance information that is not equally available to other Participating CABs

GUIDANCE NOTE: The fair competition obligation is particularly important given the commonly owned relationship between the Scheme Owner and AVID. The Scheme Owner must be able to demonstrate to other CABs considering joining the scheme, to UKAS and to regulators, that participation in the scheme does not disadvantage them relative to AVID by

reason of AVID's access to Scheme Owner governance information. The information barrier arrangements described in Section 12.2.2 are the primary mechanism for achieving this.

12.8 Transparency - Public Information Obligations

- 12.8.1 The Scheme Owner shall make the following information publicly available without request, and keep it current:
- a) **Scheme rules and scheme-specific documents** - the current and previous versions of these Rules and each active scheme-specific document, together with a summary of any changes made and the effective dates
 - b) **Certification process information** - a description of the certification process, including the stages of evaluation, the basis on which certification decisions are made, the certification period, and the conditions for surveillance, recertification, suspension and withdrawal
 - c) **Fees** - general information about the basis on which certification fees are charged, sufficient to enable prospective Certification Applicants to obtain a cost indication
 - d) **Participating CABs and ATIs** - the current register of Participating CABs and registered ATIs, including their accreditation status and admitted scheme scopes
 - e) **Certification registry** - the public registry maintained under Section 7.5, including current and historical certifications
 - f) **Complaints and appeals** - information about the scheme's complaints and appeals process, including how to make a complaint or appeal and the applicable timescales
 - g) **Impartiality arrangements** - the Scheme Owner's Impartiality and Independence Policy Statement, including disclosure of any commonly owned relationships with Participating CABs
 - h) **Governance** - a description of the scheme's governance structure, the Scheme Owner's financial model and how the Scheme Levy is applied
 - i) **Regulatory approvals** - where the scheme operates as a regulatory approved scheme, information about the applicable regulatory approval and any conditions attaching to it - including the current and previous versions of any technical requirements approved under Article 42(5) of UK GDPR
- 12.8.2 The Scheme Owner shall maintain a single publicly accessible location - www.accscheme.com - where all required public information is available or clearly signposted.



13. Scheme Development, Review and Continuous Improvement

13.1 Commitment to Continuous Improvement

- 13.1.1 The Scheme Owner is responsible for ensuring that ACCS schemes remain technically current, legally compliant, operationally effective and fit for the purpose of providing meaningful assurance to consumers, relying parties and regulators. This section establishes the framework within which the Scheme Owner develops, reviews and improves the scheme.
- 13.1.2 The detailed procedures for scheme review, stakeholder consultation and change management are set out in ACCS-P06.

13.2 Periodic review

- 13.2.1 The Scheme Owner shall conduct a formal review of each active ACCS scheme not less than once every five years. The periodic review shall assess:
- a) whether the applicable scheme-specific document and these Rules remain technically current - in particular whether the normative standards referenced remain current, whether new or revised standards have been published that should be incorporated, and whether the technical requirements reflect current best practice in the relevant domain
 - b) whether the scheme requirements remain appropriate in light of regulatory developments - including changes to UK and international legislation, regulatory guidance, approved scheme requirements and enforcement practice
 - c) whether the certification process and evaluation methodology remain fit for purpose - including whether the audit effort calculation in ACCS-P04 remains appropriate, whether the classification accuracy levels and thresholds remain technically justified, and whether the surveillance and monitoring arrangements provide adequate ongoing assurance
 - d) whether the scheme's governance arrangements - including the P-document suite - remain adequate
 - e) whether the performance of the scheme - including certification outcomes, complaints and appeals data, surveillance findings and regulatory feedback - indicates any systematic issues requiring scheme changes
 - f) whether the scheme continues to meet the requirements of any regulatory approval under which it operates - including the ICO's approved scheme requirements for ACCS 2 and ACCS 3



13.3 Triggered review

- 13.3.1 In addition to the periodic review, the Scheme Owner shall initiate a triggered review of relevant scheme provisions where:
- a) a normative standard referenced in the applicable scheme-specific document is revised, withdrawn or replaced
 - b) a significant change occurs to applicable legislation, regulatory guidance or regulatory decisions - including decisions, opinions or guidance issued by the ICO, Ofcom or equivalent authorities
 - c) a court decision, regulatory finding or enforcement action raises questions about the scheme's requirements or their application
 - d) technical developments in age assurance - including new methodologies, new research findings or new threat models - indicate that scheme requirements may no longer be adequate
 - e) a pattern of complaints, appeals or surveillance findings indicates a systematic issue with the scheme requirements or their application
 - f) the Impartiality Panel identifies a governance concern that requires scheme changes to address
 - g) a novel application under Section 6.9 indicates a gap or ambiguity in the scheme requirements
- 13.3.2 A triggered review should be initiated within 30 days of the triggering event coming to the Scheme Owner's attention. The Scheme Owner should assess the urgency and significance of the trigger and determine whether immediate interim guidance is needed while the review is conducted.
- 13.3.3 The Scheme Owner shall maintain a record of each scheme review - periodic or triggered - including the scope of the review, the evidence considered, the conclusions reached and any changes proposed. The review record should be made available to UKAS on request and summarised in the scheme's annual review report under Section 13.9.1.

13.4 Horizon Scanning

- 13.4.1 The Scheme Owner shall maintain an ongoing horizon scanning programme to identify developments that may require scheme changes before they become urgent. The horizon scanning programme should monitor:
- a) **Technical developments** - new age assurance technologies, testing methodologies, attack vectors, performance research and academic literature relevant to age assurance systems
 - b) **Standards development** - the work programmes of ISO, BSI, IEEE and other relevant standards bodies - in particular developments in ISO/IEC



27566, ISO/IEC 27001, ISO/IEC 29101, ISO/IEC 30107 and related standards

- c) **Regulatory developments** - legislative proposals, regulatory consultations, enforcement decisions and guidance publications by the ICO, Ofcom, the BBFC, the DSA and equivalent authorities in other jurisdictions
- d) **Market developments** - changes in the age assurance market, including new entrants, new deployment contexts, new relying party requirements and emerging commercial practices
- e) **Scheme performance** - feedback from Participating CABs, registered ATIs, Certification Clients, regulators and stakeholders about the scheme's operation in practice

13.5 Stakeholder Engagement

13.5.1 The Scheme Owner should maintain engagement with the following stakeholder categories in connection with scheme development and review:

- a) **Participating CABs and registered ATIs** - as the bodies that implement scheme requirements in practice, their operational experience is a primary input to scheme improvement
- b) **Certification Clients and Certification Applicants** - as the organisations that must meet scheme requirements, their experience of the certification process is an important source of feedback
- c) **Regulators** - the ICO, Ofcom, Trading Standards Authorities and equivalent international bodies
- d) **Consumer and civil society organisations** - representing the interests of consumers and others who rely on age assurance certification
- e) **Industry and trade associations** - representing sectors in which age assurance certification is relevant
- f) **Academic and technical experts** - with expertise in relevant technical domains including biometrics, machine learning, privacy, and age assurance
- g) **Standards bodies** - BSI, ISO and other bodies involved in developing standards relevant to age assurance

13.6 Consultation on proposed scheme changes

13.6.1 Before implementing any substantial change to these Rules or to an applicable scheme-specific document, the Scheme Owner may conduct a formal consultation with relevant stakeholders. The consultation should:

- a) describe the proposed change and the reasons for it

- 
- b) identify the impact of the proposed change on existing certifications and on Certification Clients - including any implications for certification scope, classification accuracy requirements or evaluation methodology
 - c) specify a consultation period of not less than 30 days for routine changes and not less than 60 days for significant changes - being changes that would require re-evaluation of existing certified scopes or material changes to the certification requirements
 - d) invite written responses from all stakeholders
 - e) consider all responses received and publish a summary of responses and the Scheme Owner's analysis before the change is implemented
 - f) where regulatory approval is required for the change - in particular for changes to ACCS 2 and ACCS 3 under the ICO's approved scheme requirements - obtain that approval before the change takes effect

13.6.2 In cases of urgency - where a regulatory, accreditation body or legal development requires immediate scheme action - the Scheme Owner may implement an interim change without prior consultation, provided that it initiates a formal consultation immediately and considers whether to revise or withdraw the interim change in light of consultation responses.

13.7 Transition periods

13.7.1 Where a scheme change imposes new or more onerous requirements on existing Certification Clients, the Scheme Owner should specify a transition period that provides a realistic opportunity for compliance. The transition period should take into account:

- a) the nature and significance of the change
- b) the time required for Certification Clients to understand, assess and implement the change
- c) the surveillance cycle - transition periods should where possible align with scheduled surveillance activities to avoid requiring additional evaluation activity outside the normal cycle
- d) any regulatory requirements about the timing of the change
- e) the impact on Participating CABs' forward planning and audit capacity

13.7.2 As a guiderail, transition periods for scheme changes should not normally be less than:

- **6 months** for changes requiring process or documentation updates only
- **12 months** for changes requiring technical modifications to certified systems
- **24 months** for changes requiring fundamental re-architecture of certified systems or processes

GUIDANCE NOTE: Transition periods are one of the most commercially significant aspects of scheme change management. Certification Clients planning technology investment need

certainty about the requirements they are investing to meet. Participating CABs need sufficient lead time to update their evaluation methodologies and auditor competence. The guiderails above are minimums - the Scheme Owner should consider whether longer transition periods are appropriate for significant changes, particularly where the change affects established market practices.

13.8 Stakeholder forum

- 13.8.1 The Scheme Owner may convene a stakeholder forum not less than once per year to discuss scheme performance, emerging issues and proposed developments. The stakeholder forum should be open to all stakeholder categories identified in Section 13.5.1 and should provide an opportunity for open discussion of scheme matters.

13.9 Continuous Improvement

- 13.9.1 The Scheme Owner may publish an annual scheme review report covering:
- a) the scheme's performance during the year - including the number of certifications granted, maintained, extended, suspended and withdrawn, presented in aggregated form without identifying individual Certification Clients
 - b) the performance of the complaints and appeals process - including the number of complaints and appeals by category, their outcomes and any systemic issues identified
 - c) the outcomes of surveillance activities across the scheme - aggregated findings including the frequency of nonconformities by type, their resolution rates and any patterns identified
 - d) the results of the horizon scanning programme under Section 13.4.1
 - e) scheme changes made during the year - including the triggers, the consultation process and the outcomes
 - f) scheme changes proposed or under consideration - including the status of any ongoing consultations
 - g) the Impartiality Panel's annual report on the operation of the impartiality framework
 - h) the Scheme Owner's priorities for scheme development in the coming year
- 13.9.2 The annual review report should be published on the scheme website within 90 days of the end of the scheme year.
- 13.9.3 The Scheme Owner may maintain a lessons learned process through which experience from certification activities - including novel applications, complex evaluations, disputed decisions, complaints and appeals - is captured and considered for its implications for scheme requirements or guidance. The lessons learned process should be:



- a) a standing agenda item at Participating CAB and ATL engagement activities
- b) considered as part of each periodic scheme review
- c) used to inform the development of Scheme Owner training materials and guidance

- 13.9.4 The Scheme Owner shall publish a certification bulletin whenever:
- a) a scheme change takes effect
 - b) a triggered review identifies a matter requiring immediate guidance to Participating CABs or Certification Clients
 - c) a novel application has been assessed under Section 6.9 and the Scheme Owner has developed guidance of general application
 - d) a change to a normative standard or regulatory requirement affects the scheme
- 13.9.5 Certification bulletins should be distributed to all Participating CABs and registered ATLs and published on the scheme website. Participating CABs should communicate relevant certification bulletins to affected Certification Clients.



14. Fees

14.1 Principle

- 14.1.1 ACCS schemes operate in an open market in which Participating CABs and registered ATLs compete for certification and testing business. Beyond the scheme-governed elements described in this section, fees charged to Certification Applicants and Certification Clients are a commercial matter for each Participating CAB and registered ATL to determine at market rates.
- 14.1.2 The Scheme Owner does not prescribe, recommend or cap the commercial fees charged by Participating CABs or registered ATLs, and does not act as an agent for the collection of those fees.

14.2 Audit Effort Calculation

- 14.2.1 The number of audit days applicable to any certification activity is determined by the audit effort calculation set out in ACCS-P04. The audit effort calculator is maintained by the Scheme Owner and is available to Participating CABs through the Scheme Owner's document portal.
- 14.2.2 The audit effort calculation methodology is applied consistently by all Participating CABs across all ACCS schemes. A Participating CAB shall not vary the audit effort calculation methodology, except where ACCS-P04 expressly provides for adjustments - such as the upward or downward adjustments for prior certification evidence under Section 6.13 and the surveillance and recertification guiderails under Section 6.20.
- 14.2.3 The audit effort calculation determines the number of days - it does not determine the daily rate charged by the Participating CAB to the Certification Client. The daily rate is a commercial matter for the Participating CAB.

14.3 Scheme Levy

- 14.3.1 The Scheme Levy is payable by each Participating CAB to the Scheme Owner in respect of certification activities conducted under ACCS schemes. The Scheme Levy is calculated on the basis of confirmed audit days at the rate specified in ACCS-P04.
- 14.3.2 The Scheme Levy is a cost of operating the scheme. How a Participating CAB recovers that cost from Certification Clients - whether by incorporating it into its daily rate, charging it as a separate line item, or absorbing it - is a commercial matter for the Participating CAB.

- 
- 14.3.3 The current Scheme Levy rate is published in ACCS-P04 and reviewed annually by the Scheme Owner. Changes to the Scheme Levy rate shall be notified to all Participating CABs not less than 3 months before taking effect.

GUIDANCE NOTE: The Scheme Levy funds the Scheme Owner's governance functions - including scheme development, the document portal, reference templates, training materials, the public registry, regulatory engagement and oversight activities. It represents the Participating CAB's contribution to the shared infrastructure that makes ACCS certification credible and commercially valuable.

14.4 Pre-Assessment Fees

- 14.4.1 A Participating CAB may charge a fee for pre-assessment activities conducted under Section 6.11.1. Pre-assessment fees are a commercial matter between the Participating CAB and the Certification Applicant. Pre-assessment activity does not form part of the audit effort calculation and does not attract the Scheme Levy.

14.5 ATL Fees

- 14.5.1 Fees charged by a registered ATL for testing activities are a commercial matter between the ATL and the engaging Participating CAB. The scheme does not prescribe testing fees. Where ATL testing costs are passed on to the Certification Client, that is a commercial arrangement between the Participating CAB and the Certification Client and is governed by the Certification Agreement.

14.6 Transparency - Public Fee Information

- 14.6.1 In accordance with the transparency obligations of Section 12.8 and ISO/IEC 17065, the Scheme Owner shall make publicly available without request:
- Scheme Levy** - the current Scheme Levy rate per audit day, published in ACCS-P04 and summarised on the scheme website
 - Audit effort methodology** - a general explanation of how audit effort is calculated, sufficient to enable prospective Certification Applicants to understand the basis on which certification costs are determined, published on the scheme website
 - Participating CAB fees** - the Scheme Owner shall publish on the scheme website a statement that commercial fees are set by each Participating CAB independently and that prospective Certification Applicants should contact Participating CABs directly for quotations
- 14.6.2 Each Participating CAB shall make general information about its fee structure publicly available - either on its own website or on request



without charge - sufficient to enable a prospective Certification Applicant to obtain a cost indication before submitting an application.

14.7 No Undue Financial Conditions

- 14.7.1 Consistent with ISO/IEC 17065, 4.1.1 and the non-discrimination requirements of Section 6.8.8, access to certification services shall not be restricted by the imposition of undue financial conditions. A Participating CAB shall not impose financial conditions that are designed to limit access to certification by organisations that would otherwise be eligible.

Annex A - Scheme Documents, Forms and Reference Templates

This Annex sets out the Scheme Owner's reference documents implementing the certification process architecture described in Section 6.3. The reference documents are available to Participating CABs and registered ATLs through the Scheme Owner's document portal.

The reference documents are maintained as controlled documents by the Scheme Owner. This Annex is updated by the Scheme Owner without requiring a formal scheme amendment - the current version of this Annex is the version published on the scheme website, which supersedes any version incorporated in a printed copy of these Rules.

A Participating CAB may use these reference documents within its own quality management system or may use equivalent documents meeting the requirements of Section 6.4.

A.1 ACCS Procedure Documents (Informative)

The following procedures are issued by the Scheme Owner under the authority of these General Scheme Rules. They set out the detailed operational requirements for matters governed by ACCS 0 and should be read in conjunction with it. In the event of any conflict between an implementing procedure and these General Scheme Rules, the General Scheme Rules shall prevail.

Reference	Title
ACCS-P01	Procedure for the Admission, Authorisation and Ongoing Oversight of Conformity Assessment Bodies
ACCS-P02	Procedure for the Registration, Approval and Ongoing Oversight of Authorised Test Laboratories
ACCS-P03	Mark Use Policy: Rights, Obligations and Enforcement Procedures for the ACCS Certification Mark
ACCS-P04	Scheme Levy and Audit Effort Calculation: Policy and Procedure for Scheme Administration Fees
ACCS-P05	Procedure for the Handling of Complaints and Appeals
ACCS-P06	Procedure for Scheme Review, Stakeholder Engagement, Change Management and Continuous Improvement
ACCS-P07	Interpretation and Application of Requirements

A.2 ACCS Scheme-Specific Documents (Normative)

The following ACCS scheme-specific documents operate under these General Scheme Rules:

Reference	Title
ACCS 1	Conformity Assessment Requirements for ISO/IEC 27566-1 - Age Assurance Systems - Part 1: Framework
ACCS 2	Technical Requirements for Data Protection and Privacy
ACCS 3	Technical Requirements for Age Appropriate Design

A.3 ACCS Forms and Templates (Informative)

The following forms and templates are issued by the Scheme Owner under the authority of these General Scheme Rules and the relevant P-documents.

Reference	Title	Governing procedure
ACCS-P01-F01	Application for Participating CAB Status	ACCS-P01
ACCS-P01-F02	Participating CAB Agreement	ACCS-P01
ACCS-P01-F03	Annual Participating CAB Performance Review	ACCS-P01
ACCS-P01-F04	Notice of Resignation of Participating CAB Status	ACCS-P01
ACCS-P02-F01	Application for Authorised Test Laboratory Approval	ACCS-P02
ACCS-P02-F02	ATL Approval Notice	ACCS-P02
ACCS-P02-F03	Annual ATL Performance Review	ACCS-P02
ACCS-P02-F04	Notice of Withdrawal from ATL Register	ACCS-P02
ACCS-P03-F01	Certification Mark Use Authorisation Notice	ACCS-P03
ACCS-P03-F02	Certification Mark Use Withdrawal Notice	ACCS-P03
ACCS-P04-F01	Scheme Levy Notification	ACCS-P04
ACCS-P04-F02	Scheme Levy Invoice	ACCS-P04
ACCS-P05-F01	Complaint Form	ACCS-P05
ACCS-P05-F02	Appeal Form	ACCS-P05
ACCS-P05-F03	Complaint / Appeal Outcome Record	ACCS-P05
ACCS-P06-F01	Scheme Review Record	ACCS-P06
ACCS-P06-F02	Scheme Change Notification	ACCS-P06
ACCS-P06-F03	Scheme Improvement Log	ACCS-P06

ACCS Templates are the evaluation and certification templates that may be used by CABs and ATLs to document certification activities under any ACCS Scheme. Templates are identified by the ACCS-T prefix. Each Participating CAB may implement the templates within its own document management system using its own internal coding, provided the content and structure requirements of the applicable scheme-specific document are met.



Reference	Title	Used at
ACCS-T01	Application Review	Pre-engagement
ACCS-T02	Initial Call and Scoping	Pre-engagement
ACCS-T03	Stage One Audit Plan	Stage One
ACCS-T04	Testing Plan	Stage One
ACCS-T05	Stage One Audit Report	Stage One
ACCS-T06	Stage Two Audit Plan	Stage Two
ACCS-T07	Stage One QA Review	Stage One gate
ACCS-T08	Test Report	Stage Two
ACCS-T09	Stage Two Audit Report	Stage Two
ACCS-T10	Evaluation Review	Post Stage Two
ACCS-T11	Post-Evaluation Certification	Certification decision
ACCS-T12	Non-Conformities During Certification	Certification lifecycle
ACCS-T13	Minded to Take Action	Certification lifecycle
ACCS-T14	Administrative Amendment	Certification lifecycle
ACCS-T15	Change Affecting Certification	Certification lifecycle
ACCS-T16	Extension of Scope - Application and Scoping	Extension of scope
ACCS-T17	Extension of Scope - Stage One Audit Plan	Extension of scope
ACCS-T18	Extension of Scope - Stage One Audit Report	Extension of scope
ACCS-T19	Extension of Scope - Stage Two Audit Plan	Extension of scope
ACCS-T20	Extension of Scope - Stage Two Audit Report	Extension of scope
ACCS-T21	Extension of Scope - Evaluation Review	Extension of scope
ACCS-T22	Extension of Scope - Certificate and Schedule	Extension of scope
ACCS-T23	Client Review	Certification lifecycle
ACCS-T24	Surveillance - Notification and Planning	Surveillance
ACCS-T25	Surveillance - Stage One Review	Surveillance
ACCS-T26	Surveillance - Stage Two Audit Plan	Surveillance
ACCS-T27	Surveillance - Stage Two Audit Report	Surveillance
ACCS-T28	Surveillance - Continuation Certificate	Surveillance
ACCS-T29	Recertification - Audit Plan and Report	Recertification
ACCS-T30	Recertification - Certificate and Schedule	Recertification
ACCS-T31	Termination, Suspension or Withdrawal of Certification	Certification lifecycle
ACCS-T32	Change of Legal Entity	Certification lifecycle

A.4 ACCS Learning and Development (Informative)

The Scheme Owner may develop specific learning and development materials for scheme specific rules. These should be allocated the code ACCS-Lxx as materials but will differ from scheme to scheme. The learning and development materials may be used by Participating CABs and ATLs.