



**Homeland  
Security**

Science and Technology

Office for Interoperability and Compatibility

## **Project 25 Compliance Assessment Bulletin**

---

Project 25 Compliance Assessment Program

Accreditation Body Authorization

Conditions and Criteria Agreement

---

**P25-CAB-AB\_AUTH\_AGREEMENT**

December 2014

---

## Notice of Disclaimer and Limitation of Liability

The Project 25 Compliance Assessment Program (P25 CAP) provides equipment purchasers demonstrated evidence of a product’s compliance with a select group of requirements within the suite of P25 standards. The test procedures used to validate these requirements are also part of the P25 suite of standards. Although successful tests will demonstrate P25 compliance for the specific requirements tested, the conclusions drawn from these tests do not apply to every environment or individual users’ needs. P25 CAP-mandated tests only demonstrate product compliance with the test procedures listed in the Supplier’s Declaration of Compliance and therefore, only attest to a product’s compliance with specific requirements within the P25 Standard.

## Revision History

Version	Date	Description
Draft (For PC)	12/12/2014	Final release version for public comment (PC) approved on December 12, 2014. Posted for PC, March 19, 2015.

## Contents

Notice of Disclaimer and Limitation of Liability .....	ii
Revision History .....	ii
1 Introduction .....	1
1.1 Scope.....	1
1.2 Normative References .....	1
1.3 Informative References.....	1
2 Requirements.....	1
3 Date, Signature .....	5

This page is intentionally blank.

## 1 Introduction

The Department of Homeland Security (DHS) Office for Interoperability and Compatibility (OIC) Project 25 Compliance Assessment Program (P25 CAP) is a voluntary program that allows P25 equipment suppliers to formally demonstrate their products' compliance with a select group of requirements within the suite of P25 standards. The purpose of the program is to provide emergency response agencies with evidence that the communications equipment they purchase meets P25 standards for performance, conformance, and interoperability.

The program requires test laboratories to demonstrate their competence through a rigorous and objective assessment process. Such a process promotes the user community's confidence in, and acceptance of, test results from recognized laboratories. All equipment suppliers that participate in the P25 CAP must use recognized laboratories to conduct performance, conformance, and interoperability tests on their products. P25 equipment suppliers will release summary test reports from recognized labs along with declarations of compliance. This documentation will serve to increase the public's confidence in the performance, conformance, and interoperability of P25 equipment.

### 1.1 Scope

This Compliance Assessment Bulletin identifies conditions and criteria for DHS authorization of accreditation bodies to provide accreditation to P25 CAP laboratories.

### 1.2 Normative References

- [1] ISO/IEC 17011, *Conformity assessment — General requirements for accreditation bodies accrediting conformity assessment bodies.*
- [2] ISO/IEC 17025, *General requirements for the competence of testing and calibration laboratories.*
- [3] P25-CAB-LAB\_BASE\_REQ, *Project 25 Compliance Assessment Program Baseline Laboratory Requirements.*<sup>1</sup>

### 1.3 Informative References

- [4] P25-CAB-LAB\_EQP\_REQ, *Project 25 Compliance Assessment Program Laboratory Equipment Requirements.*<sup>1</sup>
- [5] DHS OIC Project 25 Compliance Assessment Program Compliance Assessment Bulletins.<sup>1</sup>

## 2 Requirements

The accreditation body shall agree in writing to:

- 1) Comply at all times with the DHS conditions and criteria for authorization stated herein.
- 2) Operate its accreditation program in accordance with ISO/IEC 17011 and the specific requirements outlined in Section 2 of [4].

---

<sup>1</sup> See <http://www.firstresponder.gov/P25CAP> for the latest information and document versions.

- 3) Maintain an effective quality management system and submit to DHS an electronic copy of the accreditation body's quality management system documentation (or if online, provide read-only login access for a limited time) with the application for authorization.
- 4) Maintain its status as a signatory of the International Laboratory Accreditation Cooperation (ILAC) Mutual Recognition Arrangement (MRA) for ISO/IEC 17025.
- 5) Inform DHS in writing at least six months prior to the accreditation body's ILAC peer evaluation, invite DHS to participate in the evaluation, and provide DHS with a complete evaluation report at the completion of the evaluation process.
- 6) Participate in teleconference or in-person meetings with DHS at least annually as part of continual improvement efforts for the DHS P25 CAP. Brief DHS on the status of the program, common deficiencies and issues related to accreditation of P25 accredited laboratories to the requirements of the DHS P25 CAP laboratory accreditation program.
- 7) Inform DHS in writing within 30 days of any change in ILAC MRA signatory status.
- 8) Maintain adequate financial resources for the accreditation body's operation.
- 9) Select assessors and technical experts on the basis of their professional and academic achievements, experience in the field of testing, management experience, training, technical knowledge, assessment skills, and communication skills.
- 10) Implement a training program that includes documented procedures and requirements to ensure that assessors and technical experts are competent to evaluate to the DHS P25 CAP requirements prior to performing assessments and continue to receive new and refresher training. Per ISO/IEC 17011, training should be conducted as needed to ensure the accreditation body maintains a sufficient number of competent personnel for the work performed.
- 11) Assign assessors and technical experts for on-site assessment of a particular laboratory on the basis of how well their experience, training, and skills match the type of testing to be assessed, as well as the absence of conflicts of interest.
- 12) Ensure assessment team functions are met:
  - a) Conduct assessment on candidate and existing P25 CAP laboratories
  - b) Prepare reports based on assessments
  - c) Conduct monitoring visits on existing laboratories
  - d) Investigate and report on circumstances of any disputes
- 13) Ensure each assessment team includes a Lead Assessor who acts as the single point of contact between the assessment team and the laboratory, and the assessment team and the accreditation body, where:
  - a) The Lead Assessor is, at a minimum, a Laboratory Quality System Expert per 14), a), (i – ii)
  - b) Or, a Subject Matter Expert per 14), b), (i – vi)

- 14) Ensure assessment team members perform two related functions:
  - a) The Lead Assessor (Laboratory Quality System Expert) applies detailed knowledge of the ISO/IEC 17025 standard and meets minimum criteria:
    - i) At least three days of formal training in the ISO/IEC 17025 laboratory accreditation assessment processes and one day in P25 CAP Compliance Assessment Bulletins provided by DHS
    - ii) Preference is given to assessors with experience with an ISO/IEC 17011-recognized (that is, signatory to a MRA) accreditation body
  - b) The Subject Matter Expert assesses the technical competence of a laboratory to the requirements of the technical standards and the requirements contained in P25 CAP Compliance Assessment Bulletins, and meets minimum criteria:
    - i) Familiarity with the test method document(s) including execution method for each test and the pass/fail criteria for each test
    - ii) Familiarity with the necessary test equipment associated with each test
    - iii) Familiarity with the reference document(s) behind the pass/fail criteria for each test — Telecommunications Industry Association (TIA) Telecommunications Systems Bulletins (TSBs) and P25 CAP Compliance Assessment Bulletins
    - iv) Familiarity with the parameters and methods for configuring and programming the device under test to generally discern whether the test operator has satisfactorily configured it
    - v) Familiarity with potential P25 feature interactions impacting the execution of a test or interpretation of the results of a test;
    - vi) At least one day of formal training in P25 CAP Compliance Assessment Bulletins
- 15) Report to DHS within 30 days any major changes that affect the accreditation body's:
  - a) Legal, commercial, organizational or ownership status
  - b) Organization and management (e.g., key managerial staff)
  - c) Policies or procedures, where appropriate
  - d) Location
  - e) Personnel, facilities, working environment or other resources, where significant
  - f) Authorized representative
  - g) Other matters that may affect the capability, scope of recognized activities, or compliance with the DHS P25 CAP requirements
- 16) Allow DHS-authorized representatives, at the discretion of DHS and in coordination with the accreditation body, to witness any assessments performed for compliance with the requirements of the DHS P25 CAP.

- 17) A Scope of Accreditation shall identify the type of testing for which a laboratory has demonstrated compliance and competence. The particular test methods are contained in the relevant Compliance Assessment Bulletins published by DHS. The Scope of Accreditation will list the actual test methods for which the laboratory demonstrated competency.
- 18) The Scope of Accreditation need not include all of the test methods contained in the aforementioned Compliance Assessment Bulletins, meaning a laboratory can be accredited for a subset of test methods.
- 19) Verify that all assessment findings are resolved and corrective actions are implemented before granting accreditation to a laboratory under the DHS P25 CAP.
- 20) Upon demonstrating competence to conduct a particular Scope of Accreditation of testing, the accreditation body shall issue the laboratory a Certificate of Accreditation and addendum (if necessary) identifying the Scope of Accreditation of testing within 15 business days following a positive decision to grant accreditation.
- 21) Remain fair and impartial in all interactions with DHS P25 CAP laboratories and make its services available to all interested DHS P25 CAP laboratories without regard to size, scope of accreditation, or membership in any organization. (Neither the accreditation body, its parent company, nor any subsidiaries may operate or engage in the operation of a P25 CAP laboratory).
- 22) Safeguard all information identified as confidential by P25 CAP laboratories seeking or granted accreditation.
- 23) Verify proficiency testing data in accordance with the appropriate international standard requirements.
- 24) Maintain documentation related to DHS P25 CAP accreditations for at least five years.
- 25) Maintain a list of all P25 CAP laboratories currently accredited under the DHS P25 CAP accreditation program on the accreditation body's website. At a minimum, this list must contain:
  - a) Laboratory's name, address, and phone number
  - b) Laboratory's point of contact
  - c) Accreditation effective date
  - d) Accreditation expiration date (based on the accreditation body's reassessment policy)
  - e) Scope of accreditation
- 26) Upon request, provide DHS with copies of accredited P25 CAP laboratory's assessment documentation related to the DHS P25 CAP accreditation program, including corrective action plans and documentation of resolution of nonconformities. (P25 CAP laboratories consent to this as a condition of their accreditation.)
- 27) Notify DHS in writing ([P25CAP@hq.dhs.gov](mailto:P25CAP@hq.dhs.gov)) within five business days of any action that adversely affects the accreditation status of a DHS P25 CAP accredited laboratory, and update the accreditation body's website to document such action.



- 28) Conduct a complete on-site re-assessment of each P25 CAP accredited laboratory at least once every two or three years depending on the accreditation cycle of the authorized accreditation body.
- 29) Perform annual surveillance of each P25 CAP accredited laboratory to include at a minimum review of management review and internal audits. (Surveillance need not be performed on site.)
- 30) Forward any questions related to DHS P25 CAP test methods to DHS for resolution and abide by the decisions of DHS.
- 31) Assume responsibility for decisions to accredit P25 CAP laboratories and ensure decisions are separate from assessments. (The accreditation body cannot fully or partially delegate the accreditation decision to another organization.)
- 32) Assess documentation demonstrating the impartiality and freedom of P25 CAP laboratories management personnel from undue internal or external commercial, financial, or other pressures or influences that could adversely affect the quality of their work, as required by the appropriate international standard. DHS expects that accreditation bodies will systematically monitor the impartiality of P25 CAP laboratories on an ongoing basis.
- 33) Attest to the technical competence of the P25 CAP laboratory upon a satisfactory outcome. At a minimum, the approved methods for which the organization has been accredited should be within the scope of accreditation.

### 3 Date, Signature

To serve as an accreditation body to attain and maintain DHS-authorized accredited laboratories for the P25 CAP, an accreditation body shall agree in writing to comply at all times with the requirements herein.

---

*Issue date*

---

*Accreditation Body's Authorized Representative Signature*

---

*Issue date*

---

*Accreditation Body's Authorized Representative Printed Name*

This page is intentionally blank.