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DEFINITION OF ADMINISTRATIVE PROCEDURES REGARDING ACCREDITATION OF FORENSIC SCIENCE INSTITUTIONS OF UKRAINE

With the declaration of independence of Ukraine, a new stage of the state has begun, accompanied by radical changes in all areas of public life. A person, his life and health, honor and dignity, integrity and security are determined by the highest social value. Therefore, the main duty of the state proclaims the assertion and protection of human rights and freedoms, for which a whole mechanism is created and functioning, each of which elements performs separate tasks in order to achieve a common goal. Forensic institutions are part of the relevant system and contribute to the establishment of objective truth in cases of violation of law, the rights and freedoms of participants in the process through an objective and fair trial or an objective basis for evaluating the results of pre-trial investigation bodies. In addition to performing these tasks, forensic institutions in Ukraine have a number of necessary conditions for carrying out conformity assessment activities, and therefore, with some transformations of the management system, technical and other improvements to meet the requirements of national standards, harmonized with relevant international and European standards in the field of assessment compliance, state specialized agencies can be accredited for compliance with the requirements of the standard ISO/IEC 17025 (as well as ISO/IEC 17020) and carry out conformity assessment activities in a specific industry.

The article is devoted to the definition of administrative procedures for the accreditation of forensic institutions of Ukraine. Attention is focused on understanding the essence of administrative procedure and their place in the process of accreditation of conformity assessment bodies. The author analyzes the scientific approaches to considering the classification of the category «administrative procedure».

According to the results of the study, it can be stated that the administrative procedures for the accreditation of forensic institutions of Ukraine characterizes the procedure for authorized entities (national accreditation body of Ukraine) to carry out legally significant actions, the totality of which constitutes the legal process of accreditation; procedural requirements for these entities.

Keywords: accreditation, conformity assessment, forensic institutions, administrative procedures.

Formulation of Research Problem. With the proclamation of Ukraine's independence, a new stage of state formation has been launched, accompanied by radical changes in all spheres of public life.

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are determined by the highest social value. Therefore, the main duty of the state is proclaiming the assertion and protection of human rights and freedoms, for which a whole mechanism has been created and functioning, each of which elements performs separate tasks in order to achieve a single purpose. Forensic institutions (hereinafter referred to as the ECJ) are part of the relevant system and contribute to the establishment of objective truth in cases of violation of law, the rights and freedoms of participants in the process through an objective and fair trial or objective basis for evaluating the results of pre-trial bodies investigation. In addition to fulfilling these tasks, FSIs in Ukraine have a number of conditions necessary for carrying out activities regarding compliance testing (hereinafter referred to as CT), and consequently, under certain changes of the management system (hereinafter referred to as JI), technical and other improvements to comply with the requirements of national standards harmonized with the relevant international and European standards in the field of CT, FSIs of Ukraine should be accredited to the international standard ISO/IEC 17025 (as well as ISO / IEC 17020) and carry out activities with CT in certain areas¹.

For this purpose, FSIs should be accredited to the international standard ISO / IEC 17025 (as well as ISO/IEC 17020) and further strictly adhere to them, which will ensure the implementation of a single technical policy in the field of CT; consumer confidence in OA activities; create conditions for mutual recognition of the results of the activities of accredited bodies at the international level; to increase the dynamics of development of their methodological support through differentiation of scientific researches, to organize a wide information exchange (including information-reference arrays of samples) on a single methodological basis, etc².

Analysis of Current Researches. Nature and peculiarities of administrative procedures were considered in the scientific works of domestic and foreign legal scholars: V. B. Averianov³, D. M. Bakhrahk,

¹ *Khosha V. V.* Administratyvno-pravove zabezpechennia akredytatsii sudovo-ekspertnykh ustanov Ukrainy [Administrative and legal support of accreditation of judicial and expert institutions of Ukraine] : avtoref. dys. ... kand. yuryd. nauk. Kharkiv, 2017. S. 1. [in Ukrainian].

² Ibidem.

³ *Administratyvne pravo Ukrainy* [Administrative law of Ukraine]. Akademichnyi kurs : pidruchnyk. U 2 t. / red. Kolehiia: V. B. Averianov (holova). Kyiv. Yuryd. Dumka. 2004. T. 1. Zahalna chastyna. 2004. 584 s.; *Admynystratyvnoe pravo : uchebnyk [dlia vuzov]* / D. N. Bakhrahk, B. V. Rossynskyi, Yu. N. Starylov. 3-e yzd., peresmotr. y dop. Moskva. Norma. 2007. 816 s.; *Bandurka O. M., Tyshchenko M. M.* Administratyvnyi protses [Administrative process]: pidruchnyk dlia vyshchykh navchalnykh zakladiv. Kyiv : Litera LTD, 2002. 288 s.; *Halitsyna N. V.* Administratyvna protsedura yak instytut

O. M. Bandurka, N. V. Halitsyna, Ye. F. Demskyi, O. V. Kuzmenko, O. S. Lahoda, O. I. Mykolenko, E. V. Talapina, V. P. Tymoshchuk, V. K. Shkarupa and others. However, the administrative procedures for the accreditation process of conformity assessment bodies (hereinafter referred to as CABs) remain uncertain.

The **Article Purpose** is to analyze the legal and regulatory acts that regulate both the accreditation procedure of CTBs and the activities of the FSIs of Ukraine in order to determine the appropriate administrative procedures in this field.

Main content presentation. When considering the administrative procedures for the accreditation of the ECA of Ukraine, it is first of all necessary to define the concept of «administrative procedure». In the dictionary, the term «procedure» is defined as «the officially established or customary procedure for the implementation, execution or execution of anything»¹. With regard to jurisprudence, in the opinion of O. V. Kuzmenko, the procedure determines the procedure for the implementation by the subjects of legal relations of legally significant actions, the totality of which constitutes a legal process. Therefore, the procedure can be

administrativnoho protsesu [Administrative procedure as an institute of administrative process]. Forum prava. 2010. № 4. S. 163–177; *Demskyi E. F.* Administrativne protsesualne pravo Ukrainy [Administrative procedural law of Ukraine]: navchalnyi posibnyk dlia vuziv. Kyiv : Yurinkom inter, 2008. 495 s.; *Kuzmenko O. V.* Teoretychni zasady administrativnoho protsesu [Theoretical foundations of the administrative process]: monohrafiia. Kyiv : Atika, 2005. 352 s.; *Lahoda O. S.* Administrativna protsedura: teoriia ta praktyka zastosuvannia [Administrative procedure: theory and practice of application] : avtoref. dys. ... kand. yuryd. nauk. irpin, 2007. 21 s.; *Mykolenko O. I.* Mistse administrativnoho protsedurnoho prava v systemi yurydychnykh znan ta systemi prava Ukrainy [The place of administrative procedural law in the system of legal knowledge and system of law of Ukraine] : dys. ... kand. yuryd. nauk. Zaporizhzhia, 2011. 40 s.; *Administrativna protsedura ta administrativni posluhy* [Administrative procedure and administrative services]. Zarubizhnyi dosvid i propozyitsii dlia Ukrainy / avtor-uporiadnyk V. P. Tymoshchuk. Kyiv : Fakt, 2003. 496 s.; *Shkarupa V. K., Lahoda O. S.* Administrativna protsedura, yii znachennia ta mistse v administrativno-protsesualnii diialnosti [Administrative procedure, its importance and place in administrative and procedural activity]. Pravo Ukrainy. № 4. 2006. S. 12–14 [in Ukrainian]; *Talapina Je. V., Tihomirov Ju. A.* Administrativnye procedury i pravo [Administrative procedures and law]. Zhurnal rossijskogo prava. 2002. № 4. S. 3–13 [in Russian].

¹ Velykyi tlumachnyi slovnyk suchasnoi ukrainskoi movy [A large explanatory dictionary of modern Ukrainian] / uklad. i holov. red. V. T. Busel. Kyiv, Irpin : Perun, 2005. S. 1179 [in Ukrainian].

considered an initial form of regulation in the activities of certain bodies, which, if necessary, grow into a form called a process¹.

A. V. Filatova notes that the procedure is a legal model of certain types of activities, so *administrative procedure* is understood as the normative-legal consolidation of those activities that are implemented within the administrative legal relations and are expressed in the legal form established by law².

V. V. Galunko and co-authors define administrative procedures as the procedure established by law for consideration and resolution by public administration bodies of individual administrative cases in order to ensure the rights and freedoms, legitimate interests of individuals and legal entities, the normal functioning of civil society and the state³.

According to V. V. Ratnikov, administrative procedure is a procedural form of legal activity of authorized entities to achieve the normatively predicted result⁴. Under the procedural form P. E. Nedbaylo and V. M. Gorshenov consider a set of homogeneous procedural requirements that are imposed on the actions of participants in the process and aimed at achieving a specific substantive legal result. In other words, the procedural form should be understood as a specific legal structure aimed at embodying the principle of the most appropriate procedure for the exercise of certain powers⁵. In the legal literature, administrative procedures are defined as the order of activities or activities carried out consistently⁷.

Therefore, the administrative procedures for accreditation of the ECJ of Ukraine are characterized by:

¹ Tarasov V. A. *Ohrana prav grazhdan v pensionnom obespechenii* [Protection of citizens' rights in pensions]. Moskva : izd-vo MGU, 1978. S. 40–41 [in Russian]. Tarasov V. A. *Okhrana prav hrazhdan v pensyonnom obespechenyy*. Moskva : Yzd-vo MHU, 1978. C. 40–41.

² Filatova A. V. *Reglamenti i procedury v sfere realizacii gosudarstvennogo kontrolja (nadzora)* [Regulations and procedures in the field of implementation of state control (supervision)]: monografija / pod red. N. M. Konina. Saratov : Nauch. kniga, 2009. S. 92 [in Russian].

³ *Administrativne pravo Ukrainy* [Administrative Law of Ukraine] : navch. posib. : u 2 t. [V. V. Halunko, V. i. Olefir, M. P. Pykhtin ta in.] ; za zah. red. V. V. Halunka. Kherson : PAT «Khersonska misla drukarnia», 2011. T. 1: *Zahalne administrativne pravo*. S. 276 [in Ukrainian].

⁴ Ratnikov V. V. *Administrativnaja procedura akkreditacii v sfere vysshego obrazovanija* [Administrative accreditation procedure in the field of higher education]: avtoref. dis. ... kand. jurid. nauk. Cheljabinsk, 2012. S. 11 [in Russian].

⁵ *Juridicheskaja processual'naja forma: teorija i praktika* [Legal procedural form: theory and practice] / pod obshh. red. P. E. Nedbaylo, V. M. Gorsheneva. Moskva : Jurid. lit-ra, 1976. S. 13–14 [in Russian].

⁷ Talapina Je. V., Tihomirov Ju. A. *Administrativnye procedury i pravo* [Administrative procedures and law]. Zhurnal rossijskogo prava. 2002. № 4. S. 4 [in Russian].

1) procedure for carrying out legally significant actions by the authorized person (the national body of Ukraine on accreditation), the totality of which constitutes the legal accreditation process;

2) procedural requirements imposed on the subjects.

The procedure for accreditation by the national accreditation body of Ukraine (hereinafter – NOAB) is defined by the provisions of the Law of Ukraine: *On Accreditation of Conformity Assessment Bodies* and specified in the guidance of the management of the National Agency for Accreditation of Ukraine (hereinafter – NAAU) dated on February 09, 2016. The analysis of these legal acts allows to distinguish the following stages of the CAB accreditation procedure:

1) application for accreditation or extension of the scope of accreditation by the applicant;

2) consideration of documents and information annexed to the application;

3) forming the composition of the accreditation group and informing the applicant;

4) analysis of the information and documentation provided;

5) drawing up a plan and informing the applicant thereof;

6) on-site assessment (hereinafter referred to as OSA);

7) analysis of the collected materials, preparation of reports and the act of assessment on the spot;

8) evaluating the results of accreditation work, making recommendations and making decisions.

Therefore, the basis for the start of the administrative procedure of accreditation of the FSIs of Ukraine is the submission of the application of the established form to the NAF together with the necessary list of documents, which is formed depending on the type of future CTB.

The list and application forms are published on the NAF website¹.

The following documents shall be submitted with the application for accreditation of FSI in accordance with the requirements of ISO/IEC 17025:

1) statutes (Statutes and Regulations, copies of certificates on state registration of legal entity and registration of the payer of value added tax);

2) questionnaire, including general information about the FSI (name; name of the responsible person; address; form of ownership; management body, etc.); information on cooperation with other laboratories (institutions); presence of valid accreditation certificates,

¹ Podannia zaiavky na akredytatsiiu [Submission of application for accreditation]. URL : <http://naau.org.ua/podannya-zayavky-na-akredytatsiyu/> (data zvernennia 28.06.2019) [in Ukrainian].

authorization for such on the declared field of work in other accreditation systems; the number of expert studies in the areas of the FSI activity conducted during the one year prior to the application submission, etc.;

3) FSI passport;

4) *Areas of accreditation* project;

5) documentation of the control system in accordance with DSTU ISO / IEC 17025: 2017 (list of documentation, complete set of procedures and others);

6) location information of the applicant's premises in the city;

7) layout of FSI and adjacent premises with equipment layout;

8) copies of diplomas or other documents certifying the qualification of the head, his deputies and persons entitled to sign protocols and specimen signatures;

9) copies of the original test reports (studies) for each activity;

10) a questionnaire stating: classification of accreditation (primary, repeated, extension of scope, etc.); information about the SEA and the person who drew up the questionnaire; generalization of the scope of accreditation; the number and item of the document that fulfills the requirements of DSTU ISO / IEC 17025: 2017;

11) data on evaluation of test methods (researches).

The application and the aforementioned list of documents must be accompanied by the relevant cover letter which is registered in the records of Administrative and Accounting Department and archives department of the NAF Planning.

Acceptance, entry control and registration of the application is carried out in accordance with the methodology M-08.08.03, approved by the order of NAAU of July 31, 2014 № 185-I, designed to ensure the effective and efficient functioning of processes that operate in the agency.

After registration, the said package of documents is first submitted to the NAF management for decision; then to the accreditation department for further processing in the established order (registration of the received application in paper and electronic form, assignment of its serial number and verification of completeness of documents, etc.).

In case of deficiencies in filling in the application or in the formation of a set of documents, the applicant (responsible representatives of the FSI) must finalize the submitted materials within a period not exceeding 120 days.

It should be noted separately that during the review of the Accreditation Areas project, the NAAU SEU performs resource analysis in accordance with ISO/IEC 17011, which states in paragraph 7.3 that the accreditation body must analyze its ability to assess the CAB applying for

accreditation under its own conditions. its own policy, its competence and the availability of relevant assessors and experts.

In the absence of adequate resources (for example, experts with relevant technical knowledge), NAAU has the right to refuse the SEA the further accreditation process.

To make a decision on the application under consideration, a responsible (executor) is appointed, who, by the consequences of checking the availability of all necessary documents, completeness and sufficiency of information in them, prepares a protocol of consideration and a draft decision, the correctness of which is checked by the head of the accreditation department. Further, the correctness of the conclusions drawn and the draft decision are verified by the Head of the accreditation department and approved by the First Deputy Chairman for accreditation of NAF.

The next step in the administrative procedure for the accreditation of the ECA of Ukraine is: forming the composition of the accreditation audit team and informing the applicant in advance; drawing up, verification and signing of the accreditation agreement; drafting and approval of the Accreditation Program group formed; an analysis by the audit team of the information provided in the documents.

The Head of the accreditation department of the NAF CTB after submitting to it an application of the FSI with a set of documents by the department for accreditation, registration and issuance of certificates of accreditation, appoints the responsible executor of the relevant department of accreditation and transmits the documents in paper and electronic form to the head of the accreditation auditing team contacts between members of the group, about which an appropriate entry is made in the Accreditation Program.

The technical and terminological analysis of the information provided by the FSI is carried out by a group of auditors in accordance with the approved NAAU methods: *Conducting the analysis of the information and documentation provided by the applicant laboratory* M-08.01.09, approved by the Order of the NAF dated January 27, 2014 № 177-I (with accreditation according to with the requirements of ISO/IEC 17025) and *Conducting analysis of information and documentation provided by the applicant (certification body, inspection body)* M-08.03.11, approved by NAF Order № 183-Y on June 20, 2014 (accredited according to with requirements standard ISO / IEC 17020).

According to the results of the analysis of documents, an act is sent and sent to the FSI.

In case of negative results of the analysis, the applicant must finalize the documents within a period not exceeding 90 days and send them for re-analysis with the conclusion of an additional agreement.

If the period of completion is exceeded, the application shall be canceled.

Based on the act of analysis by the group of auditors of the information and documentation provided by the SEA (together with the accreditation auditors' reports), the NAF accreditation department prepares a draft decision in two copies, approved by the NAF Chairman, and with the act is sent to the applicant in one copy (the second copy is left to the other).

In the case of positive results of the audit by the audit team of the information and documentation provided by the FSI, the next step in the administrative procedure is the OSA based on the relevant plan, which agrees with the applicant and contains information on accreditation criteria based on standards, ILAC/IAF/EA documents, etc.

The on-site assessment is performed in order to establish the conformity of the SEU with the accreditation requirements and is carried out in accordance with the plan in accordance with the methods of *Conducting on-site laboratory evaluation* M-08.01.14, approved by the NAF Order № 189-I of October 17, 2014 (accreditation in accordance with ISO / IEC 17025) and *On-site Assessment by Certification and Inspection Bodies* M-08.03.15, approved by NAF Order № 184-I on July 7, 2014 (accredited in accordance with ISO/IEC standard 17020).

The main stages of on-site assessment are: holding a preliminary meeting with the management of the SEU; reviewing, collecting evidence and observing the assessment to obtain objective information on the compliance of the SEA with the accreditation criteria; analysis of objective data collected and determination of conformity (non-compliance) of SEA with accreditation criteria; holding a final meeting with the management of the SEU to discuss the results of the evaluation and drafting and signing of the minutes of the meeting, defining the terms of elimination of the identified discrepancies¹.

During the preliminary meeting, which is held and recorded with the attendance registration (in 2 copies): the members of the SEA management are presented to the management of the audit team by their manager, establishing official contacts, reviewing the scope and tasks of the assessment and briefing on the appropriate methods, reporting etc; communicates to the responsible representatives of the SEU information on the conditions under which the evaluation may be terminated, the procedure for lodging appeals regarding the conduct or conclusions of the evaluation; the issues of confidentiality, the Evaluation Plan, the date and

¹ Metodyka «Provedennia otsinky laboratorii na mistsi» [Methodology "Conducting on-site laboratory evaluation"] : nakaz Nats. ahentstva z akredytatsii Ukrainy vid 17.10.2014 r. № 189-ia. URL: https://naau.org.ua/files/Metodiki/M-08_01_14.pdf (data zvernennia 28.06.2019) [in Ukrainian].

time of the final meeting and, if necessary, the intermediate meetings are agreed; the Head of the Audit Team informs the SEA of the deadline for completing the appropriate monitoring forms and the questionnaire (no later than five days after the NAAU receives the decision on the evaluation results); the members of the audit team are instructed by an authorized SEA officer on safety rules.

While FSI accreditation in accordance with the requirements of ISO/IEC 17025 assesses the functioning of the SU, both in terms of policy and its practical application, the presence of the basic elements reflected in DSTU ISO / IEC 17025: 2017, and the practical implementation of technical requirements and methods of expert research.

In order to ensure that a sufficient number of objective observations and evidence of the compliance of the SEA activities with the requirements of accreditation are collected, the head of the audit team constantly monitors their work and adjusts sources of information, which may include: direct observation of the activity, working conditions and working environment of the SEA; analysis of working documents (orders, job descriptions, procedures, plans, personnel records, etc.); analysis of work records (expert reports, meetings, monitoring reports, etc.); SEA website and analytical databases. The accreditation of FSIs in accordance with the requirements of ISO / IEC 17020 shall use the CT schemes defined in such a general document as *Criteria for evaluation and acceptance of conformity assessment schemes* ZD-08.08.29, approved by NAF Order № 183 of June 20, 2014 -I. The specific reference in the FSI documents is checked.

Specific reference in the FSI documents is checked. Sources of information are defined in ISO 19011: 2011, subp. 6.4.6 which states that, during the audit, information related to the audit objectives, area and audit criteria, including information regarding the interaction between units, activities and processes, should be collected through appropriate sampling and verified. Audit confirmation should only include verifiable information. Audit certificates must be registered. If the audit team becomes aware of any new or changed risks, the audit team should consider and take appropriate actions¹. The results of the observations made during the assessment shall be heard at the final meeting, which shall be attended by members of the audit team, the representatives of the FSI and, if desired, other interested parties.

One copy of the minutes of the summary meeting, which contains the conclusions of the evaluation group together with the non-

¹ ISO 19011:2011. Guidelines for auditing management systems. Valid from 2011–11–15. Geneva : iSO, 2011. 44 p.

conformance protocols, shall remain in the FSI. If any discrepancies identified by the audit team of the relevant Protocol are identified in the course of the assessment, the FSI is invited to make adjustments to remedy them within 3 months from the end of the assessment. Also, within 3 working days, the Head of the Audit Team draws up and submits to NAF information in the form of a service record of the non-conformities established during the FSI assessment.

Corrective action and other pertinent information that could assist in determining compliance with the requirements and competence of the SEA is provided to the audit team in a documented manner as confirmation of the non-compliance, followed by full or partial additional (re) assessment on the spot within no more than 2 business days. The Head of the Accreditation Audit Team, after compiling and submitting to the OSA Members (in paper and electronic form), within a period not exceeding 10 working days, draws up the relevant OSA Act that together with the Reports is submitted to the NAF within a period not exceeding 14 business days from the end of the assessment. In assessing the results of the work of the SEA accreditation, if necessary (eg, in case of different interpretations, etc.), NAAU may ask for discussion and consideration by the TKA Presidium (hereinafter referred to as PTCA), which provides a specialist in the relevant field for carrying out such work. The results of the process of evaluation of accreditation works by a representative of TKAP are formulated in the form of a recommendation according to the approved form of NAF. The decision is made after receiving the OSA Act, the whole set of documents and, if necessary, the recommendations of the TKAP:

1) Responsible executor who checks the completeness of the case, the correctness of records (availability of dates and signatures);

2) Head of the department, who checks the completeness and implementation of the evaluation program and all aspects of FSI accreditation (including observations, accreditation criteria, use of relevant EA/ILAC/IAF recommendations), identified inconsistencies and corrective actions;

3) Head of the accreditation department who is responsible for the correct execution of the draft decision on accreditation. He is also responsible for presenting the case to the Chairman for a final conclusion;

4) First Deputy Chairman for accreditation, who is responsible for verifying the correctness of the recommendations and conclusions made¹.

The final decision is made and approved in accordance with the current legislation of Ukraine by the NAF Chairman, after which: the accreditation certificate is issued and issued for a period of 5 years; SEA information is entered in the register of accredited CTB; General Agreement between NAF and FSI is concluded, which contains their rights and obligations.

Following the completion of the FSI accreditation and the receipt of the relevant certificate, administrative procedures also include: conducting monitoring through the supervision and extraordinary assessments of the activities of the accredited FSI; expanding or limiting the scope of accreditation; suspension or cancellation of accreditation certificate.

Supervision always involves OSA, the term of which is determined by the audit plan. The frequency of scheduled inspections is not affected by the number of extraordinary assessments of the FSI, which, if necessary are made after consideration of NAF appeals or complaints related to the activities of the accredited FSI received in accordance with the procedure established by law, as well as on the instructions of the central executive authorities, requirements state control and law enforcement agencies, obliged to comply with the current legislation, in accordance with the methodology *Monitoring organization and conducting of through the implementation of extraordinary assessment*².

According to the accredited NAF accreditation procedure, a re-evaluation is carried out every 5 years.

For the purpose of monitoring by means of re-evaluations, the SEU must submit, within 6 months before the expiration of the validity of the accreditation certificate, a set of documents on paper and electronic media.

If the FSI did not apply to the NAF with a request for re-accreditation within the specified period; the evaluation procedure must be performed in accordance with the requirements of the initial assessment.

¹ Poriadok akredytatsii [Accreditation order]. URL : <http://naau.org.ua/dokumenty-dlya-akreditatsiyi/poryadok-akreditatsiyi/> (data zvernennia 28.06.2019) [in Ukrainian].

² Metodyka «Orhanizatsiia ta provedennia monitorynhu shliakom zdiisnennia pozacherhovoi otsinky» [Methodology «Organization and monitoring carried out with a slut for a posture of a rough draft»] M-08.00.19, redaktsiia 08 vid 17.05.2018. URL : http://naau.org.ua/wp-content/uploads/2014/04/M-08.00.19_red_06_Monitoring_COOV.pdf. (data zvernennia 28.06.2019) [in Ukrainian].

Monitoring of NAF (if necessary with involvement of specialists of other organizations) is carried out:

- for activity of accredited FSIs in accordance with the requirements of ISO / IEC 17025 in accordance with the methodology «*Monitoring organization and conducting through the supervision of accredited laboratories and extraordinary assessments*» (M-08.01.12) that is developed in accordance with the requirements of the Law of Ukraine «On accreditation of bodies Conformity Assessment», ISO / IEC 17011 and EA-3/09 Special Document *Sirveillance and Reassessment of Accredited Organizations* for the continued compliance established during accreditation;

- for activities of accredited FSIs in accordance with the requirements of ISO/IEC 17020 in accordance with the methodology *Organization and carrying out of monitoring by supervision of accredited certification bodies, inspection bodies and extraordinary assessments* (M-08.03.13) that is developed in accordance with the requirements of the Law of Ukraine «On Accreditation of Conformity Assessment Bodies» and requirements of European and International Documents (ISO / IEC 17011: 2004, IAF / ILAC-A4: 2004, IAF / ILAC A5: 11/2013, IAF GD 5: 2006, IAF GD 24 : 2009 and EA-3/09).

The process of carrying out monitoring by means of supervision and monitoring by means of carrying out extraordinary assessment of activity of accredited NAF testing and calibration laboratories for compliance with the requirements of DSTU ISO / IEC 17025: 2017 in accordance with Art. 11 of the Law of Ukraine: *On Accreditation of Conformity Assessment Bodies* is carried out in the following succession:

1. Supervision planning.
2. Drawing up and approving the schedule of supervision.
3. Analysis of FSI documents to be monitored and results of previous evaluations.
4. Evaluation program development.
5. Formation of the composition of the group of auditors on accreditation.
6. Making of contracts with SEA and auditors.
7. Drawing up an assessment and information plan for the SEA.
8. The evaluation plan shall be based on a developed and approved oversight program.
9. Signing of the contract and OSA (observation).
10. Analysis of collected materials, evaluation of evaluation results.
11. Decision making by NAF management and informing about the results of FSI assessment.

In case the facts of non-compliance with the accreditation criteria are identified, NAF has the right to request from the FSI the introduction of corrective measures (the elimination period is 1 month after the on-site assessment is completed). In addition, in the event that the FSIs are not

identified and the requirements for competence in a particular area of accreditation are not complied with, NAF has the right to limit the scope.

The FSI has the right to apply for the extension of the scope of accreditation, the decision of which is made by NAF after the measures of verification of CTB competence.

NAF conducts an extraordinary assessment of accredited FSIs upon receipt of appeals and complaints filed in the statutory cases, related to the activities of accredited laboratories and identified violations of accreditation requirements. In the absence of evidence of prior appeal, in the case of admissibility, the NAF proposes in writing to the applicant to address the laboratory directly to the laboratory, with the exception of consideration of requests (appeals) of the People's Deputies of Ukraine, the requirements of law enforcement and state control bodies.

Extraordinary assessment may be carried out in case the NAF receives requests from the central executive authorities, requests from state control and law enforcement agencies, which establish the fact or available information about the FSI committing gross violations of its duties (clause 1.2 of the Methodology: *Organization and Conducting of Monitoring by Exercise extraordinary assessment*¹).

NAF extraordinary assessment of accredited FSIs is conducted in a similar sequence oversight procedure, except for the first two steps, which are the consideration of an appeal or complaint and the ordering of an appropriate assessment as a result of a positive consideration of NAF applications or complaints.

In some cases, it is a temporary suspension (cancellation) of the accreditation certificate. If necessary, as observers, within the limits of their powers, representatives of local executive authorities and local self-government bodies, law enforcement agencies and other bodies of their control may be involved in carrying out the extraordinary evaluation. In order to verify the facts that led to the violation and became the basis for the FSI supervision, the program of this measure contains only the requirements of the sections of the regulatory documents that need to be verified. If the FSI members of the group of auditors are not allowed to hold an on-site assessment on the spot or the authorized representative of the FSI does not sign the relevant documents, prepared by the group, the

¹ Metodyka «Orhanizatsiia ta provedennia monitorynhu shliakhom zdiisnennia pozacherhovoi otsinky» [Methodology «Organization and monitoring carried out with a slut for a posture of a rough draft»] M-08.00.19, redaktsiia 08 vid 17.05.2018. URL : http://naau.org.ua/wp-content/uploads/2014/04/M-08.00.19_red_06_Monitoring_COOV.pdf. (data zvernennia 28.06.2019) [in Ukrainian].

audit leader shall record this fact in the minutes of the preliminary meeting, which is signed by all members of the group of auditors. The members of the group of auditors are also entitled to record the process of conducting an extraordinary assessment on the spot or each individual action by audio and video equipment without hindering such an audit.

The Head of the Accreditation Audit Team, after compiling and submitting to the Members within a period not exceeding 2 working days, draws up the relevant Act for early on-site assessment, which together with a set of documents is submitted to NAF for a period not exceeding 3 working days. business days from the date the assessment was completed.

In case of a negative decision, these issues are considered by the relevant commission, upon which the NAF Chairman makes the final decision.

Upon approval by the Chairman of the negative opinion and taking into account the decision on the results of consideration of complaints (complaints), the department of accreditation, registration and issuance of certificates of accreditation, the relevant information is entered in the register of accredited CTBs, of which the complainant is informed in writing (in some cases, by the decision of the NAF stakeholders). This information is also available on the NAAU's official website. In case of gross violations of the accreditation criteria (eg detection and non-elimination of SEA discrepancies, incorrect use of the accreditation mark, preventing SEU members of the group of auditors from conducting an extraordinary assessment on the spot, the negative result of consideration of appeals (SEU) during the decision of the SAA, etc. Certificate of accreditation for a period of 1 year. It is prohibited to carry out work in the field of its activity with reference to the national accreditation mark in case of temporary suspension of the FSI. If the FSI does not remedy the discrepancies within the term of the Decision on suspension of the certificate, it shall be canceled without the possibility of its renewal.

The general algorithm of administrative procedures of accreditation of the SEU of Ukraine is shown in fig. 1.

Conclusions. Therefore, the administrative procedures for accreditation of the FSIs of Ukraine are characterized by: 1) the procedure for carrying out legally significant actions by the authorized by the subject (NOUA), the totality of which constitutes the legal accreditation process;

2) procedural requirements imposed on the subjects. In addition to the administrative procedure for accreditation of SEA of Ukraine, monitoring of accredited SEA of Ukraine through supervision and re-evaluation is of key importance for conformity assessment activities.

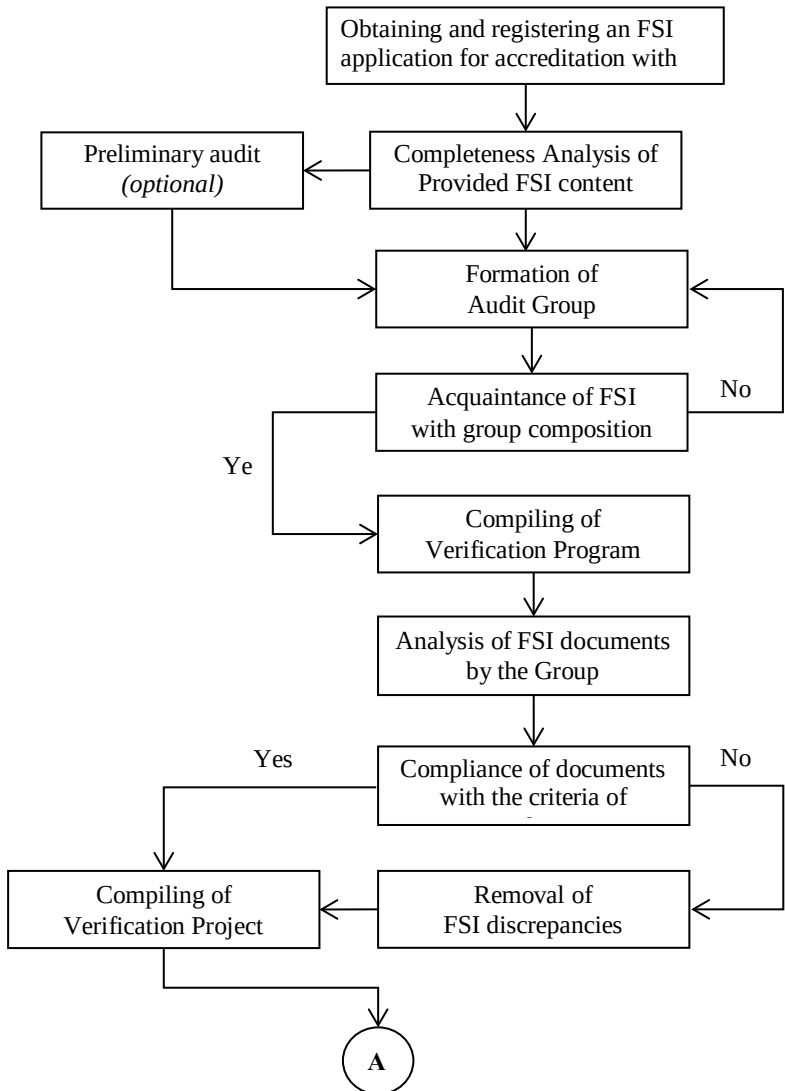


Fig.1: General algorithm of administrative procedures of accreditation of the FSI of Ukraine

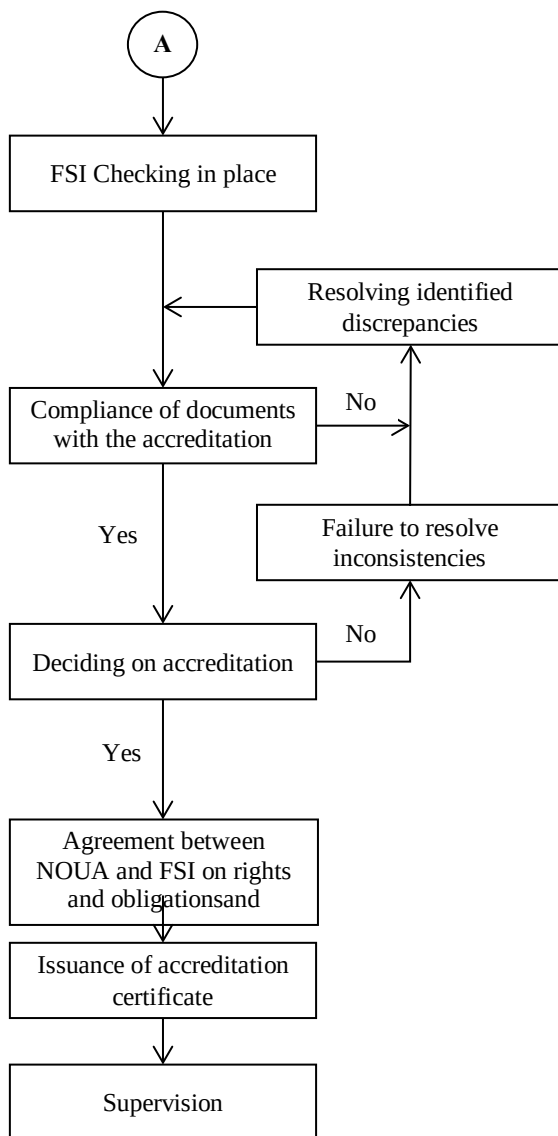


Fig. 1: General algorithm of administrative procedures of accreditation of the FSI of Ukraine

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ВИЗНАЧЕННЯ АДМІНІСТРАТИВНИХ ПРОЦЕДУР АКРЕДИТАЦІЇ СУДОВО-ЕКСПЕРТНИХ УСТАНОВ УКРАЇНИ

Статтю присвячено визначенню адміністративних процедур акредитації судово-експертних установ України. Акцентовано увагу на розумінні суті адміністративних процедур та їх місця в процесі акредитації органів з оцінки відповідності. Проаналізовано наукові підходи до розгляду питання класифікації категорії «адміністративна процедура».

За результатами проведеного дослідження можна констатувати, що адміністративні процедури акредитації судово-експертних установ України характеризують порядок здійснення уповноваженим на те суб'єктом (національним органом України з акредитації) юридично значущих дій, сукупність яких складає юридичний процес акредитації; процедурні вимоги, які пред'являються до вказаних суб'єктів.

Ключові слова: акредитація, оцінка відповідності, судово-експертні установи, адміністративні процедури.

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