

	SOP Evaluation Activities			
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WMDA

SOP: EVALUATION ACTIVITIES

CHANGE RECORDS

Version	Date	Change Type	Change Description
1	2021-12-07	Document creation	Subdivided up Accreditation Policy and Procedure Manual into separate policies and procedures
2	2022-12-06	No change in the document Moved to P4 Document Centre	Previous version of the document: 1 Previous reference: ACC-7400-SOP Approved by: ASC Approval date: 20211207 From now on, version control will be managed by SharePoint.
3	2023-07-13	Revision	ASC approved. Removed overlap with SOP on addressing CAPAs arising during evaluation; changing requirements for timing of response to RFI
4	2024-10-01	Terminology	Replacement of term Accreditation by Certification. Updated Fig. 1 to new terms.
5	2025-02-03	Revision	Revision of the terms evaluation, audit and inspection. Addition in section 8. Mid-cycle surveillance to check compliance with the WMDA Certification Agreement Updated figure 2
6	2025-04-06	Addition	Added reference to Certification Scheme document. Updated for consistency with Certification Scheme document.
7	2025-07-10	Terminology	Preliminary assessment has been renamed to preliminary application review to clarify its purpose. Fixed numbering of section 9.

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8	2025-11-24	Addition	Added how MCS reviewers are selected
9	2025-12-17	Addition	Description of role of CSC representative as reviewers (NCB-03 ISO 17065 audit by RvA)

1. INTRODUCTION

1.1 PURPOSE AND SCOPE

WMDA (previously World Marrow Donor Association) has developed standards, a certification scheme, and a certification process for registries involved in the international exchange of blood stem cell products. This document describes the evaluation activities that occur once an application is accepted. It also covers a surveillance that takes place midway through the four-year cycle.

This document covers the following sections:

1. Introduction
2. Evaluation - Variation in activities
3. Evaluation - Desk audit
4. Evaluation - Request for more information (RFI)
5. Evaluation - On-site (or remote) audit
6. Evaluation report
7. Role of Certification Steering Committee representative - Review
8. Certification Committee - Review and certification decision
9. Mid-cycle surveillance during each four-year cycle
10. Review of a complaint or appeal related to application or mid-cycle surveillance

1.2 PARTY RESPONSIBLE FOR THIS DOCUMENT

The Certification Steering Committee (CSC) develops and reviews this document.

1.3 APPLICABLE AND REFERENCE DOCUMENTS

Here below are listed the documents needed to understand the information provided by this policy and intended to be an extent of the policy itself.

Identifier	Title
https://share.wmda.info/display/Ensuring+Quality/WMDA+Standards	WMDA International Standards for Haematopoietic Stem Cell Donor Registries
ACC_7400_01_M	How to Perform an On-Line Assessment in Share
ACC_7401_01_WI	Definitions of Scoring System for Nonconformities
ACC_7400_16_M_ROA	Manual for on-site and remote audits

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ACC_7401_01_F	WMDA Registry Report on Compliance with Benchmark Standards
ACC_7401_02_F	WMDA Registry Report – Compliance with Full Set of WMDA Standards
ACC_7401_03_F	Mid-Cycle Surveillance Report
ACC_7110_F	Standards, Services and Levels
ACC_7110_CS	WMDA Certification Scheme
ACC_7400_21_F	Review of the Evaluation Process

The following documents, although not a part of this policy, amplify or clarify its contents.

Identifier	Title
ACC_7200_SOP	SOP: Application and Application Review
https://share.wmda.info/x/ao3LGw	Template: Share Application
ACC_7100_SOP	SOP: Systematic Revision Process for WMDA Standards
ACC_7130_SOP	SOP: Complaints and Appeals Related to Certification Program
ACC_7402_SOP	SOP: Handling of Corrective and Preventative Action Plan Required by Major or Critical Finding During an Evaluation
ACC_7500_SOP	SOP: Certification Committee
ACC_7400_13_F	Remote Audit Risk Assessment
ACC_8700_SOP	Corrective and Preventative Actions

1.4 ABBREVIATIONS AND DEFINITIONS

- Full Standards status (previously Accreditation/ accredited)
- Benchmark L1 status (previously Certification / certified)
- Benchmark L2 status (Qualification / qualified)
- CSC, Certification Steering Committee
- Benchmarked standards, a subset of the WMDA Standards that are considered as the basis for the evaluation of Benchmark L1 or Benchmark L2 status. Benchmark L2 is considered a first step to Full Standards status. The benchmarked standards are critical for registry quality and provide a reasonable and practical first step for a registry undergoing its first compliance assessment (Benchmark L2) and / or a registry with very low activity (Benchmark L1).
- Client or Applicant or Registry, Organisation responsible for coordination of the search for haematopoietic stem cells from donors (including cord blood) unrelated to the potential recipient, for the collection and transport of the donation, and for the care of the donor. It includes both unrelated donor registries and umbilical cord blood banks. Donor centres might also be certified if they are affiliated with an uncertified registry.
- Desk audit, assessment of documents that demonstrate compliance
- Evaluator, individual selected to evaluate an application or mid-cycle surveillance

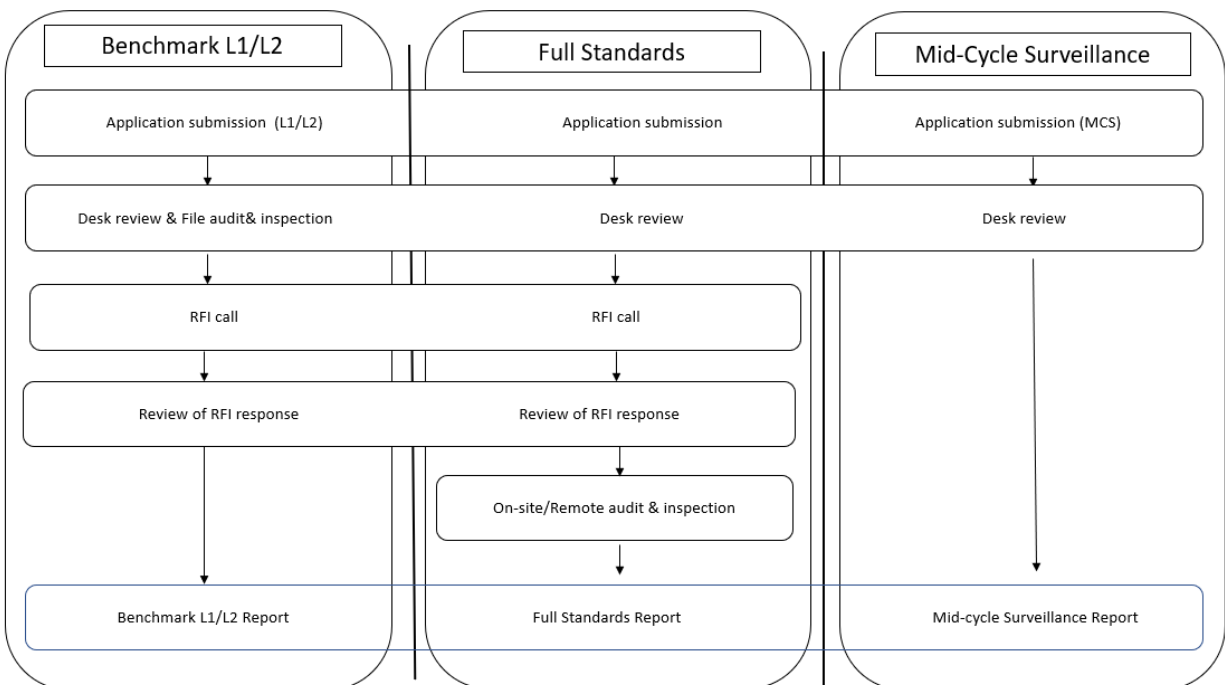
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- LOI, letter of intent
- On-site or remote audit, audit where the evaluators are either on-site at the applicant's place of business or directly contacting the applicant through video conferencing. Donor files are examined as well as other reports.
- RFI, Request For Information
- Share, on-line collaboration platform
- SOP, standard operating procedure
- WMDA, previously World Marrow Donor Association

2. EVALUATION - VARIATION IN ACTIVITIES

2.1 LEVELS OF CERTIFICATION PROGRAM. Before the evaluation starts, the application needs to be approved according to the specifications in [ACC_7200_SOP: Application and Application Review](#). The evaluation activities differ as shown in Figure 1 and Table 1.

Figure 1. Evaluation activities



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Table 1. Evaluation activities			
Evaluation activity	Benchmark L1/L2	Full Standards	Mid-Cycle Surveillance
	Review letter of intent Preliminary application review	Review letter of intent	
Desk review/audit	Compliance of written policies/procedures with WMDA benchmarked Standards; Evaluation of Key Performance Indicators: Audit of records and inspection of services and outcome of services; Evaluation team: 2 experienced evaluators + optional trainee (L2 or L3) Time: 6 weeks	Compliance with all required WMDA Full Standards; Evaluation team: 2 experienced evaluators + optional trainee (L2 or L3)	Compliance for specific areas (see section 9); Evaluation team: 1 experienced evaluator or L3 trainee Time: 4 weeks
RFI ¹ call	Evaluation team + CSC representative	Evaluation team + CSC representative	N.A. ²
Review of RFI responses	Evaluation team + CSC representative if discussion is required	Evaluation team + CSC representative if discussion is required	N.A.
On-site/remote audit	N.A.	Assessment of records, interviews, observation, inspection; Evaluation team: 2 experienced evaluators + optional trainee (level L3)	N.A.
Report	Evaluation team + CSC rep	Evaluation team + CSC rep	Evaluation team + CSC rep

¹ RFI, Request for (more) Information

²N.A., not applicable; CSC, Certification Steering Committee

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2.2 STEM CELL SOURCE AND TRANSPLANT CENTRE AFFILIATION VARIATION

Applicants submit their application using an on-line template in Share. Applicants may apply for one or more of the following subservices:

1. Receive requests for searches; maintain searchable database
2. Coordinate provision of adult volunteer donors as a source of stem cells
3. Coordinate provision of umbilical cord blood units as a source of stem cells
4. Provide support for search requests from registry's transplant centres

2.3 CERTIFICATION SCHEME

Depending on the client's letter of intent, evaluations will focus on subsets of the [WMDA International Standards for Haematopoietic Stem Cell Donor Registries](#) applicable to the chosen stem cell source, receipt of requests for searches, and whether the applicant supports searches for affiliated transplant centres (see [ACC_7110_F Standards, Services, Levels](#)). The scheme is described in [ACC_7110_CS WMDA Certification Scheme](#).

2.4 ACCEPTANCE OF CERTIFICATES FROM OTHER ORGANISATIONS

WMDA might accept certificates from other organisations as proof of compliance with one or more WMDA Standards. Before accepting the certificates from other organisations, the WMDA Standards Committee reviews the proposed alternatives standards and designates which WMDA standards might be covered.

- 2.4.1 The applicant must provide a copy of its current certification document from an organisation recognized by WMDA as providing certification for standards that overlap WMDA Standards.
 - 2.2.4.1 The WMDA Standards Committee is responsible for providing a list of the WMDA Standards that have already been evaluated by that alternative organisation ([ACC_7100_SOP: Systematic Revision Process for WMDA Standards](#)). The list is posted in Share.
- 2.4.2 If the registry will use the certificate from the other organisation to demonstrate compliance for the overlapping WMDA Standards, the applicant is not required to demonstrate compliance with the identified overlapping standards but is required to respond to the remaining WMDA Standards and to inform WMDA about non-compliance identified by the other certification body and currently active.
- 2.4.3 The evaluation procedure will be performed as indicated below in Evaluation - desk audit; Evaluation - Request for more information, and Evaluation - On-site/remote audit as required according to this procedure.
- 2.4.4 Loss of certification from the other international organisation is considered a major change. This includes the situation where one of several cord blood banks loses NetCord-FACT certification. In this case, the registry will be asked to complete section 4 (cord blood) of the standards if they have not already done so.

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3. EVALUATION - DESK EVALUATION

This evaluation step is applicable for all types of submissions (see Figure 1 and Table 1) ([ACC_7400_01_M How to Perform an On-Line Review in Share](#)).

- 3.3 Evaluations are based on compliance with [WMDA International Standards for Haematopoietic Stem Cell Donor Registries](#) aided by the guidance associated with each standard. The WMDA Standards are associated with a series of services that are evaluated by the evaluation team ([ACC_7110_F Standards, Services, Levels](#)).
- 3.2.1 Evaluations of Benchmark Level 1 or Level 2 applications are based on a subset of WMDA Standards designated as “benchmarked.” Registry’s written policies and procedures and records are assessed by inspection to determine compliance with WMDA Standards. If the registry also includes documentation for non-benchmarked standards, these will also be evaluated; however, the decision to approve Benchmark Level 1 or Level 2 is based only on benchmarked standards.
- 3.2.2 Evaluations of Full Standards applications are based on all required WMDA Standards.
- 3.2.3 Evaluation of a mid-cycle surveillance submission is focused on only specific requirements (See Section 9).
- 3.4 Assessment of services by evaluators, experienced in the services evaluated, through a desk evaluation includes:
- Ann assessment of materials provided in the application is performed in a desk evaluation. Documents (e.g., policies, procedures, forms, service level agreements, websites, informational material, certificates, licenses) are assessed by inspection to evaluate whether they comply with WMDA Standards. Analysis based on performance indicators is also evaluated.
 - Benchmark application only: Files on volunteers who have gone from search to collection of blood stem cells to follow-up post donation are audited to determine if the applicant is complying with WMDA Standards on a day to day basis.

4. EVALUATION - REQUEST FOR MORE INFORMATION (RFI)

This evaluation step is part of the application for submissions. It is not applicable to mid-cycle surveillance (see Figure 1 and Table 1).

- 4.1 Evaluator comments are consolidated by the team leader and discussed by the team via a videoconference within 1.5 months of receiving the application. If the information provided is deemed as inadequate to document compliance with a WMDA Standard, a request for additional information is sent to the applicant.
- 4.2 An applicant seeking compliance for the first time is given a maximum of two (2) months to respond to the request for more information. An applicant seeking Full Standards is given a maximum of 1.5 months to respond to the request for more information. Exceptions regarding timing can be granted by the Certification Steering Committee.

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- 4.3 If the first RFI does not provide all the information the evaluation team needs for the assessment, they can decide to request more information in another RFI round or during the on-site/remote audit and inspection (if applicable).

5. EVALUATION - ON-SITE/REMOTE AUDIT AND INSPECTION

This evaluation step is applicable for Full Standards evaluations. It is not applicable for Benchmark Level 1/Level 2 and mid-cycle surveillance (see Figure 1 and Table 1).

- 5.1 The WMDA will conduct an on-site or remote (video conference) audit and inspection when the client applies for and when it renews Full Standards ([ACC_7400_16_M_ROA Manual for on-site and remote \(video conference\) audits](#)).
- 5.2 The Certification Steering Committee representative together with the WMDA office will determine if the audit and inspection will be remote or on-site based on a risk assessment ([ACC_7400_13_F Remote Audit Risk Assessment](#)). The on-site or remote audit and inspection will take place after the initial assessment of submitted documentation (i.e., after the desk evaluation) and after the request for more information is sent to the applicant.
- 5.3 Assessment of services by evaluators through an on-site or remote audit and inspection includes:
- During an on-site or video (remote) inspection and audit, files of activities including quality management files (audits of service providers, reports of serious events and reactions, agendas) and donation files covering search through collection and follow-up) are assessed to determine if the applicant is complying with WMDA Standards on a day to day basis. This is complemented by interviews with staff performing these activities and by observation of activities and the surrounding work environment and conditions.

6. EVALUATION REPORT

This evaluation step is applicable for all submissions (see Figure 1 and Table 1).

- 6.1 For applications, following the receipt of additional information and/or the on-site (or remote) audit and inspection (if applicable), the evaluators complete their independent assessment.
- 6.2 Evaluator comments are consolidated by the team leader and discussed by the team (if needed) within one (1) month of the receipt of addition information or the on-site/remote audit and inspection.
- 6.3 The identification of nonconformities by evaluators must be accompanied by documentation proving that the applicant did not meet a WMDA Standard or its activities do not reflect best practice (e.g., the specific details of files examined). Scores indicating the severity of the nonconformity are listed in [ACC_7401_01_WI Definitions of Scoring System for Nonconformities](#). Suggestions for improvement are included.
- 6.4 A consensus report with a recommendation for approval/disapproval is prepared by the evaluation team and reviewed by the Certification Steering Committee representative for clarity and consistency. The report will be submitted to the Certification Committee ([ACC_7401_02_F WMDA Registry Report –](#)

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Compliance with Full Set of WMDA Standards; ACC_7401_01_F WMDA Registry Report on Compliance with Benchmark Standards).

7. ROLE OF CERTIFICATION STEERING COMMITTEE REPRESENTATIVE- REVIEW

A CSC representative has access to the evaluation information and oversees the evaluation process and conclusion. The CSC representative attends meetings of each evaluation team and reviews the RFI questions to be sent to the registry, as well as the final evaluation report containing the recommendation for a certification decision. The CSC representative completes a final report ([ACC_7400_21_F Review of the Evaluation Process](#)).

8. CERTIFICATION COMMITTEE – CERTIFICATION DECISION

The consensus report from the evaluation team is provided to the Certification Committee for review and decision on compliance ([ACC_7500_SOP SOP: Certification Committee](#)).

9. MID-CYCLE SURVEILLANCE DURING EACH FOUR-YEAR CYCLE

- 8.1 The focus of the surveillance is to determine if the applicant is “on track” for its next application ([ACC_7401_03_F Mid-Cycle Surveillance Report](#)). Assessment covers the following areas:
 - 8.1.1 Changes to the applicant not previously reported to the WMDA that may affect WMDA compliance status (WMDA Standard 1.05 version 2024).
 - 8.1.2 Major changes as to how the applicant complies with WMDA Standards
 - 8.1.3 Weaknesses/suggested improvements noted in the last external evaluation team report
 - 8.1.4 Implementation of new/revised WMDA Standards
 - 8.1.5 Update of previously submitted certifications provided for Standard 1.02 version 2024 (e.g., NetCord-FACT)
 - 8.1.6 Compliance with the WMDA Certification Agreement
 - 8.1.7 Noncompliance at the level of major or critical will be noted as described in ACC_7402_SOP SOP: Handling of Corrective and Preventative Action Plan Required by Major or Critical Finding During an Evaluation
- 8.2 The applicant will complete a template in Share covering the assessment areas listed above.
- 8.3 The surveillance will be performed by a single experienced L5, L4 or L3 evaluator (Figure 1 and Table 1). The evaluator is selected by the certification office staff with advice from the Certification Steering Committee representative.
- 8.4 The evaluation report will be provided to the Certification Committee for review and a decision ([ACC_7500_SOP SOP: Certification Committee](#)).

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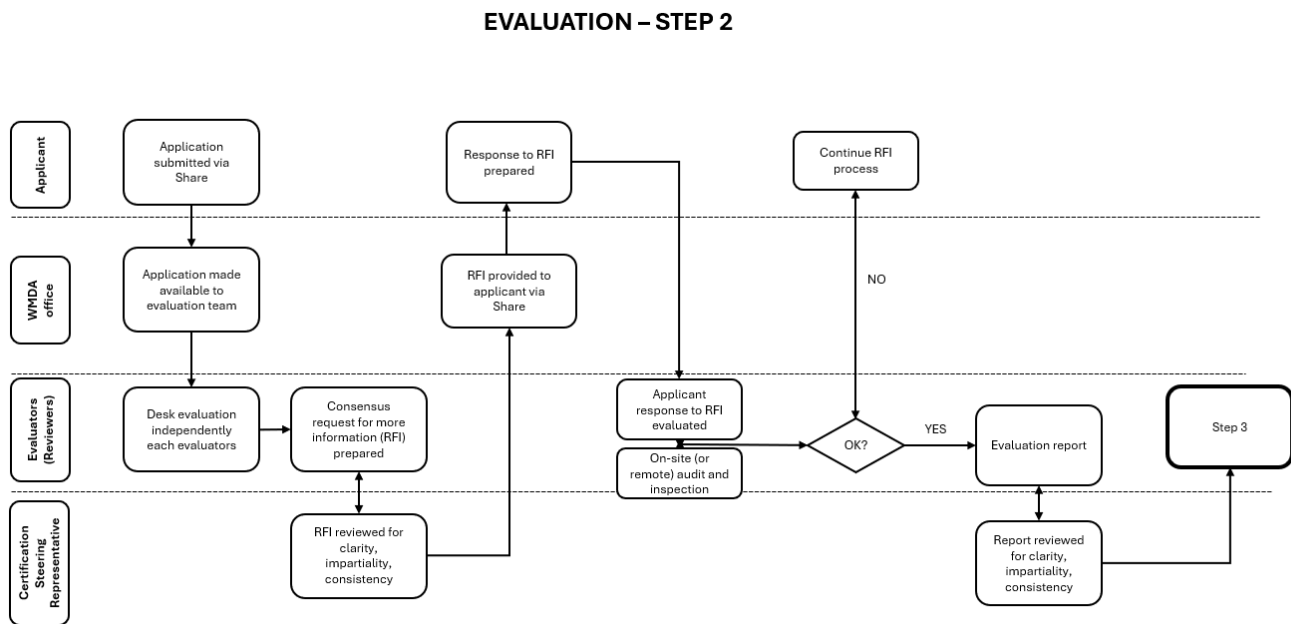
10. REVIEW OF A COMPLAINT OR APPEAL RELATED TO APPLICATION OR MID-CYCLE SURVEILLANCE

If an applicant appeals a decision related to its application or a decision related to mid-cycle surveillance, the subsequent evaluation will focus only on those standards in question ([ACC_7130_SOP: Complaints and Appeals Related to Certification Program](#)).

Surveys completed by the applicant and evaluators post-decision will be used to determine the level of satisfaction with the certification scheme and its associated activities. Actions may be taken based on comments received ([ACC_8700_SOP: Corrective and Preventative Actions](#)).

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Figure 2. Evaluation activities



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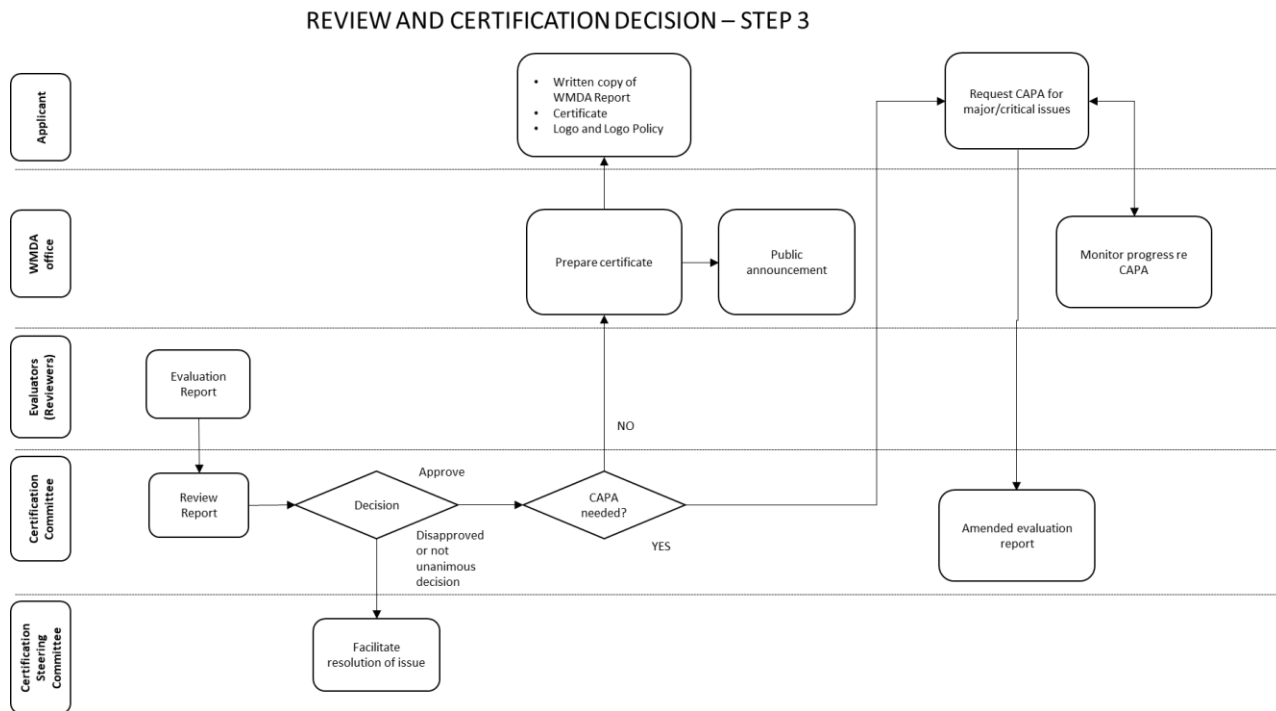


Figure 3. Review and certification decision