Snapshots of IO Practices

ILAC-WADA Co-operation

Organisation(s): International Laboratory Accreditation Cooperation (ILAC), World Anti-Doping Agency (WADA)

The Snapshots of IO Practices present examples of specific efforts undertaken by an international organisation to work towards more effective international instruments. They aim to highlight examples of practices within the five focus areas of the Partnership of International Organisations for Effective International Rulemaking (IO Partnership), namely the variety and development of international instruments, their implementation, evaluation, ensuring stakeholder engagement, and co-ordination among IOs. The snapshots are submitted by the secretariats of the relevant international organisations implementing the relevant practice. The practices were compiled by the OECD Secretariat and focal points of the IO Partnership (UNCITRAL, OIE, WHO, ISO, WCO, BIPM, and SIECA), with a brief review to ensure consistency and comparability of the information provided within the snapshots. The inclusion of a practice in these snapshots implies no endorsement or assessment of that practice on the part of the OECD Secretariat or the focal points of the IO Partnership.

1	Overview of the Practice	Answers	Comments and intersections
1.1	Organisations	International Laboratory Accreditation Cooperation (ILAC) World Anti-Doping Agency (WADA)	
1.2	Area of relevance among the IO partnership focus themes (variety of instruments, implementation, stakeholder engagement, evaluation, co-ordination)	Co-ordination (Co-ordination in Monitoring Activity)	
1.3	Name of the Practice	Co-operation (*Dyadic* IO partnership, involving two international organizations: ILAC and WADA)	
1.4	Name of person(s) completing the template	Ms. Victoria Ivanova, Dr. Osquel Barroso and Dr. Olivier Rabin (WADA) Ms. Annette Dever, Ms. Sharon Kelly and Ms. Etty Feller (ILAC)	

2	Description of the Practice	Answers	Comments and intersections
2.1	Please describe the practice shortly, providing information on its core features.	The ILAC-WADA Co-operation is aimed at exchanging relevant information on matters related to the criteria for the assessment and accreditation of anti-doping laboratories, harmonizing the application of these criteria and optimizing practices in the assessment and accreditation of anti-doping laboratories worldwide. WADA-accredited laboratories are required to maintain a dual accreditation status by demonstrating compliance with two international standards: 1) ISO/IEC 17025 (General requirements for the competence of testing and calibration laboratories) and 2) the WADA International Standard for Laboratories (ISL). Accreditation against ISO/IEC 17025 can only be granted by ILAC full member accreditation bodies (ABs), which are also signatories to the ILAC Mutual Recognition Arrangement (MRA), and this accreditation serves as the prerequisite for WADA's laboratory accreditation. In addition, the WADA accredited laboratories must demonstrate compliance with the ISL and other WADA laboratory normative documents (Technical Documents, Technical Letters, Laboratory Guidelines) which are more specific standards applicable to the field of anti-doping testing. The objective of the ILAC-WADA co-operation is to achieve greater consistency in laboratories' monitoring of compliance with international standards. This compliance monitoring is performed by ILAC MRA signatory accreditation bodies at the national level, and by WADA internationally.	

2.2	What are the objectives of the practice?	ILAC and WADA co-ordinate their efforts within the framework of their respective mandates. The ILAC-WADA co-operation is aimed to: • Ensure the exchange of relevant information on matters related to the criteria for the assessment and accreditation of WADA anti-doping laboratories; • Inform the other Party about the progress of work related to activities of common interest; • Harmonise and optimise the application of accreditation practices (e.g., assessor training, joint assessments, scopes of accreditation, etc); • Identify opportunities for mutual representation on selected committees and working groups, which are engaged in activities of common interest.	
2.3	What have been the key results of the practice?	• Better co-ordination and harmonization of accreditation practices of WADA anti-doping laboratories; • Improved problem-solving in the area of laboratory assessments and accreditation; • Establishment and maintenance of the international pool of ISL-trained assessors; • Development and production of common guidelines; • Well-established communication, exchange of information and good practices.	
2.4	In what year was the practice introduced?	In 2003	

2.5	Has the practice been updated/reformed since then? If yes, when and how has it evolved over time?	Yes The MoU between ILAC and WADA undergoes revision on a regular basis. After the initial signing of the MoU in 2007, the document was reviewed every 3 years and was renewed in 2010, 2013, 2016 without significant changes. November 2007 - Initial MoU signed at the Third World Conference on Doping in Sport, Madrid, Spain; October 2010 - The MoU reconfirmed during the ILAC General Assembly organized in Shanghai, China; November 2013 - The MoU re-signed at the IV World Conference on Doping in Sport in Johannesburg, South Africa; November 2016 – The MoU reconfirmed at the ILAC General Assembly in New Delhi, India.	
2.6	What do you consider to be the primary strengths of the practice?	• Better harmonization in laboratory accreditation practices; • Enhancement in compliance monitoring by means of complementary accreditation activites; • Well-established communication, exchange of information; • Increased public trust in laboratory results; • Lowered risk for laboratories errors and omisisons due to dual accreditation and more stringent monitoring; • Well-established reputation of co-operation.	
2.7	What do you consider to be the main challenges faced during the implementation of the practice?	• Variations of accreditation practices in different economies; • Turnover in laboratory assessors.	

2.8	Does the practice have a formal/normative basis within the organisation or is it conducted informally? Does this basis make the practice mandatory or voluntary? If there is formal basis, please provide the relevant link or documentation.	WADA and ILAC officially formalized their partnership by signing the Memorandum of Understanding (MoU) on the 15 November 2007 at the World Conference on Doping in Sport held in Madrid, Spain. This regulatory instrument is taken by both Parties as a strong incentive to comply with its provisions. https://ilac.org/about-ilac/partnerships/international-partners/wada/ ILAC-WADA Liaison Group A joint Working Group (known as the ILAC/WADA Liaison Group) meets at least once a year to ensure co-ordination and harmonization of tasks related to accreditation of anti-doping laboratories.	
2.9	At what frequency is the practice applied? i.e. is it conducted once or on an iterative basis?	The ILAC-WADA co-operation (co-ordination in monitoring activity) is ongoing/continuing practice.	
2.10	Is this practice applied systematically, (e.g. with respect to every normative instrument, according to specific criteria or on an ad hoc basis)?	This practice is applied systematically .	

2.11	Please provide specific details or examples to illustrate the practice (including supporting links and documents).	List of WADA ISL-trained assessors: https://www.wada-ama.org/en/resources/laboratories/list-of-isl-assessors ILAC Communications: 1. ILAC First Communication (2004) 2. ILAC Second Communication (2009) 3. Third ILAC-WADA Communiqué (2021) https://ilac.org/about-ilac/partnerships/international-partners/wada/ Joint ILAC-WADA Guidelines for Harmonization of Scopes of ISO/IEC 17025 Accreditation of WADA Anti-Doping Laboratories: https://www.wada-ama.org/en/resources/science-medicine/guidelines-for-harmonization-of-scopes-of-isoiec-17025-accreditation-of	
3	**Design of the Practice**	**Answers**	**Comments and intersections**
3.1	Who designed the practice (e.g. Was it developed internally, in collaboration with other organisations, etc?)	The practice was developed in collaboration between WADA and ILAC.	
3.2	Which stakeholders were engaged with in the design of the practice?	WADA-accredited laboratories and Accreditation Bodies involved in accreditation of these laboratories	
3.3	How long did it take to design the practice?	Approximately 2 years	

3.4	What resources were needed to design the practice initially (i.e., staff, budget etc.)?	Staff and budget	
3.5	What challenges were encountered during the design of the practice and how were they overcome?	WADA was a newly established and not yet well known international organization at the time	
3.6	Has the practice been tested before implementation (i.e. pilot phase)? If yes, please describe.	No	
4	**Implementation of the Practice**		**Comments and intersections**
4.1	Which units are responsible for implementing the practice within your IO?	Laboratories' Division of WADA's Science and Medicine Department	
4.2	Are IO members involved in implementing the practice? If so, how?	IO members are involved in implementing the practice by managing the compliance with the MoU, by serving as co-convenor of the ILAC-WADA Liaison Group, by organizing the ISL-assessors trainings, by participating in the international meetings relevant to this practice.	
4.3	Are external actors beyond the organisation or its membership involved in implementing the practice? If so, how?	Consultations with relevant stakeholders are made before the implementation of any element/tools of this practice. The practice is run on a consensus-based approach.	
4.4	Which resources are needed to implement the practice (e.g., staff and budget)?	Staff and budget.	

5	Outputs and Evaluation of the Practice	Answers	Comments and intersections
5.1	Has the practice been evaluated or reviewed?	Yes, regular review of MoUs.	
5.2	If yes, who carried out the evaluation (please specify whether it was done internally or externally)	Review of MoU by both Parties.	
5.3	If yes, please describe the evaluation methodology? (e.g. were any quantitative or qualitative indicators/criteria used to measure/assess the outcomes of the practice?).	N/A	
5.4	If yes, what were the conclusions of the evaluation,and has the practice evolved subsequently? If possible, please attach related documents or provide a link.	N/A	
6	**Additional comments and information**	**Answers**	**Comments and intersections**
6.1	Is there any more information or documentation that would be valuable to share in relation to the practice (e.g. links, reports, meeting minutes, supporting documents)?	Already provided above.	
	Sources		