

**Quality and Accreditation Institute**  
**Centre for Laboratory Accreditation**



*Change Adapt Improve*

**POLICY ON ASSESSMENT,  
SURVEILLANCE AND REASSESSMENT**

Effective from 1 February 2020

Issue No.: 01

Issue Date: February 2020

|                                     |   |               |
|-------------------------------------|---|---------------|
| Quality and Accreditation Institute |   |               |
| Centre for Laboratory Accreditation |   |               |
| Doc. No.: QAI CLA 016               | Policy on Assessment, Surveillance and Reassessment |               |
| Issue No.: 01                       | Issue Date: February 2020                           | Page No.: 1/4 |

## CHANGE HISTORY

| Sl. No. | Doc No. | Current Issue No. | Revised Issue No. | Date of Issue | Reasons |
|---------|---------|-------------------|-------------------|---------------|---------|
|         |         |                   |                   |               |         |
|         |         |                   |                   |               |         |
|         |         |                   |                   |               |         |
|         |         |                   |                   |               |         |
|         |         |                   |                   |               |         |
|         |         |                   |                   |               |         |
|         |         |                   |                   |               |         |
|         |         |                   |                   |               |         |

## 1. Introduction

QAI CLA endeavours to comply with the requirements of ISO/IEC 17011:2017 as applicable from time to time. To ensure confidence in the results of the accredited laboratories and compliance to global needs, QAI also implements required ILAC and APAC policies and use guidance documents to assist in the uniform and harmonised approach of accreditation criteria.

## 2. Existing Policy for Assessment, Surveillance and Reassessment

Currently, QAI CLA accreditation cycle is of two years. There is an on-site surveillance in 12 months and reassessment is conducted before the expiry of accreditation within 24 months from the date of accreditation.

## 3. New Policy for Assessment, Surveillance and Reassessment

QAI CLA accreditation cycle will be of two years. There will be an on-site reassessment conducted before the expiry of accreditation within 24 months from the date of accreditation. An accredited laboratory has to apply six months before the expiry of accreditation in order to complete all formalities for renewal of accreditation before the expiry of the current accreditation cycle so that continuity of the accreditation is maintained.

***This is in full compliance with the Clause 7.9.3 of ISO/IEC 17011:2017 which states "A sample of the scope of accreditation shall be assessed at least every two years. The time between consecutive on-site assessments shall not exceed two years."***

Further, accredited laboratory is required to submit following information/documents/ records every year in the middle of the accreditation cycle. This is to ensure that the accredited laboratory is continuously complying with the requirements of the applicable standard (ISO/IEC 17025:2017 or ISO 15189:2012) and any other requirements stipulated from time to time.

### A. Internal Audit

- A.1 Internal audit plan
- A.2 Date of last internal audit
- A.3 Summary of findings of last internal audit

### B. Management Review

- B.1 Management review plan
- B.2 Date of last management review
- B.3 Minutes of the last review

### C. Proficiency Testing/ External Quality Assessment Schemes/ Inter-laboratory comparisons (ILC)/ Any other method (e.g. use of CRMs)

- C.1 Proficiency testing plan to cover the accredited scope in a period of four years
- C.2 Details of participation in last one year
- C.3 Details of action taken for any unsatisfactory results

### D. Major Changes, if any

Any major changes in last one year (e.g. change in legal status, change in management and senior staff, change in testing scope etc.)

### E. Declaration by the Management (on the letter head)

A statement "This is to declare that that the laboratory has been complying to the requirements of ISO/IEC 17025:2017 or ISO 15189:2012 and any other requirements prescribed by the QAI CLA since last on-site assessment"

|  |  |  |                      |
|--|--|--|----------------------|
| <b>Quality and Accreditation Institute</b> |  |  |                      |
| <b>Centre for Laboratory Accreditation</b> |  |  |                      |
| <b>Doc. No.: QAI CLA 016</b>               |  | <b>Policy on Assessment, Surveillance and Reassessment</b> |                      |
| <b>Issue No.: 01</b>                       |  | <b>Issue Date: February 2020</b>                           | <b>Page No.: 3/4</b> |

**Quality and Accreditation Institute**

Website: [www.qai.org.in](http://www.qai.org.in)

Twitter@QAI2017

|  |  |                      |
|--|--|----------------------|
| <b>Quality and Accreditation Institute</b> |  |                      |
| <b>Centre for Laboratory Accreditation</b> |  |                      |
| <b>Doc. No.: QAI CLA 016</b>               | <b>Policy on Assessment, Surveillance and Reassessment</b> |                      |
| <b>Issue No.: 01</b>                       | <b>Issue Date: February 2020</b>                           | <b>Page No.: 4/4</b> |