

LABORATORY ACCREDITATION PROCESS



**R&D CENTER FOR ELECTRICITY, NEW-RENEWABLE ENERGY,
AND ENERGY CONSERVATION TECHNOLOGY
THE AGENCY OF R&D FOR ENERGY AND MINERAL RESOURCES
MINISTRY OF ENERGY AND MINERAL RESOURCES**

JAKARTA, AUGUST 21, 2014

BSN - KAN



International Body

ISO
ILAC / IAF

APLAC

Asia Pacific Laboratory
Accreditation Cooperation

SADCA

South African Development
Community Cooperation in
Accreditation

IAAC

Inter American
Accreditation Cooperation

EA

European Accreditation

Regional Body



National Body



PREPARATION FOR ACREDITATION



- Top management commitment for assuring the laboratory **must be** accredited
- Create an accreditation team
- Create structure organization of the laboratory
- Equipment inventory
- Human resources skill inventory
- Quality system document
- Internal audit and management review

Top Management Commitment



- Commitment from the Director (top management) that laboratory must be accredited
- Most of team member has already understood the laboratory quality system (ISO/IEC 17025:2005)

Accreditation Team



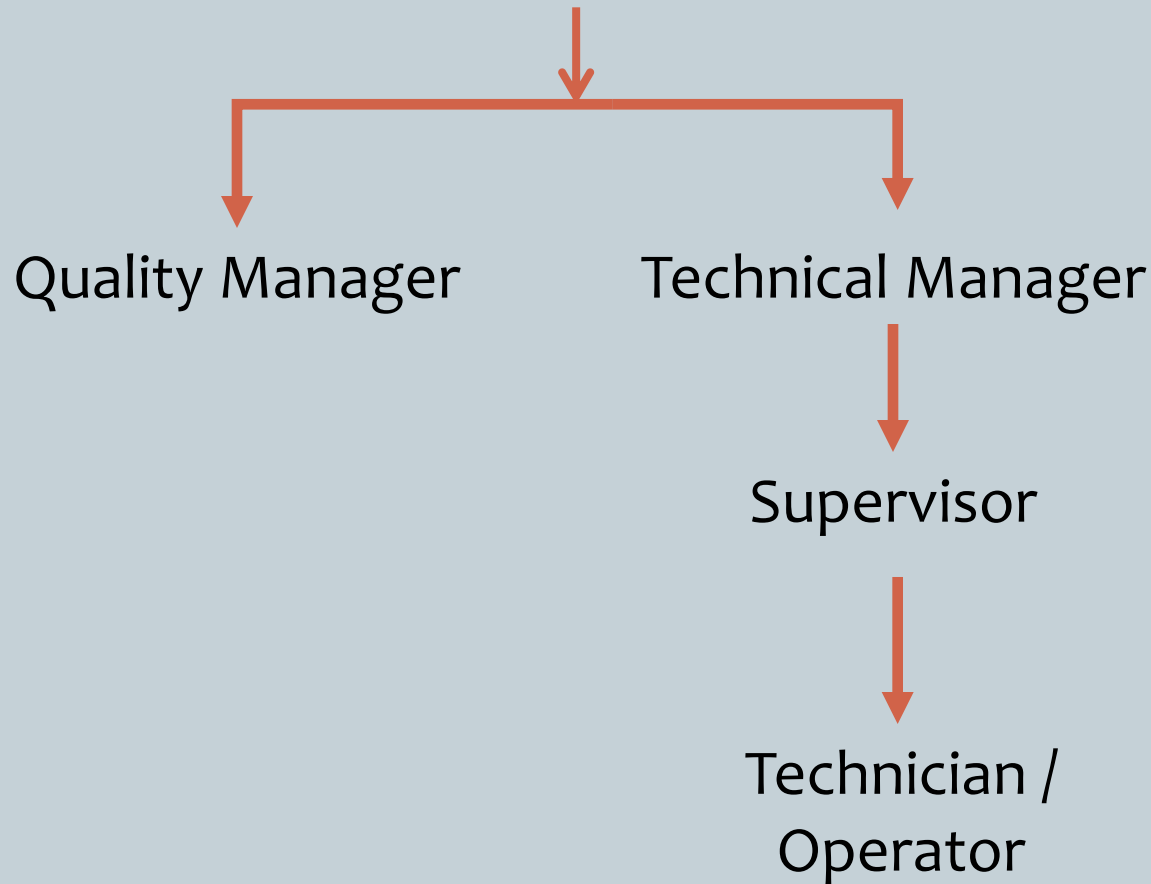
Task of accreditation team :

- ✓ Propose structure organization and it's personnel
- ✓ Giving deep understanding and awareness of laboratory quality system
- ✓ Human resources inventory
- ✓ Equipment inventory
- ✓ Standard and object references inventory
- ✓ Test results evaluation for quality assurance
- ✓ Making verification, calibration, and proficiency test program
- ✓ Test capabilities inventory
- ✓ Propose scope of test
- ✓ Create laboratory quality system document
- ✓ Socialization of testing quality system to all personnel
- ✓ Practice evaluation of testing quality system

Structure Organization Laboratory



Executive Manager



EQUIPMENT INVENTORY



- Does the main equipments still fit to use ?
- Check when was the last time verification and calibration of the main equipments ?
- Does the verification and calibration of the main equipment still satisfy ?
- Does the supporting equipments still fit to use ?

HUMAN RESOURCE SKILLS INVENTORY



- Academic certificate
- Analysis skill certificate (competency)
- Quality training certificate

LABORATORY QUALITY SYSTEM DOCUMENT



- ❖ List of documents :
 - Level I : Quality guidelines
 - Level II : Quality procedure & SOP (Technical)
 - Level III : method & operating instructions
 - Level IV : Form & Documentation
- ❖ Specifying format and document content for each level
- ❖ Document uniqueness
- ❖ Document traceability
- ❖ Document reference
- ❖ Document status
- ❖ Document control

INTERNAL AUDIT REPORT



- Time of audit execution
- Name of auditor
- Name of laboratory representation
- Date of the ability for improvement action
- Numbers and categories of finding incompatibility
- Action of findings improvement
- Verification of improvement action

REVIEW REPORT

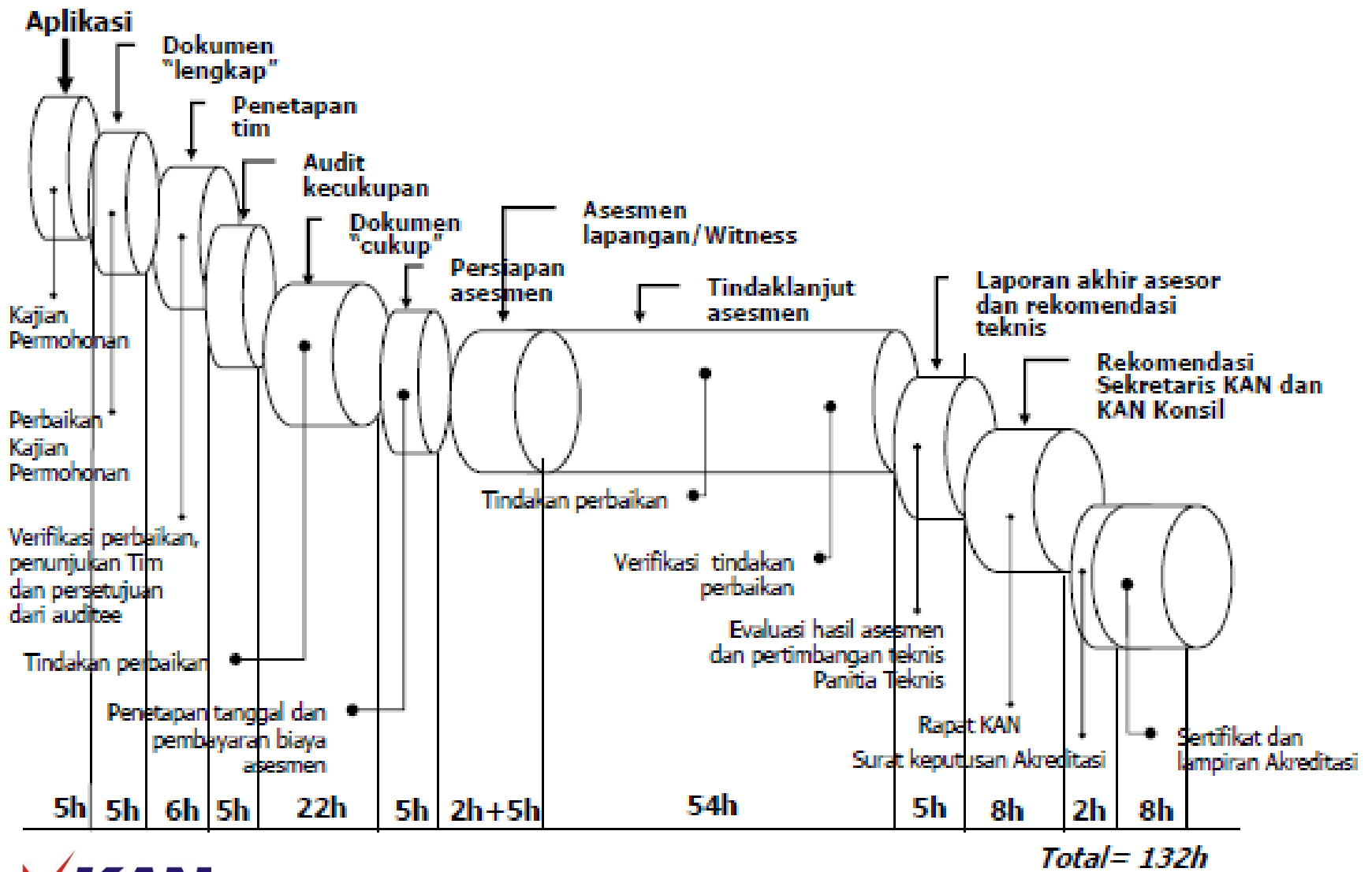


Reviewing must be coordinated by top management, which consist of :

1. All of findings from the internal audit that has been improved or not finished yet
2. All personnel certificate of trainings
3. All documents completeness and validity
4. All main equipments calibration certificate
5. Evaluation of proficiency test results (satisfactory)



*KAN's Procedure
of Accreditation Process*



ACCREDITATION PROCESS



- Propose accreditation application
- Quality guidelines improvement
- Comply with administration requirements
- Pre-assessment / assessment
- Improvement of incompatibility findings until verification results satisfactory
- Waiting technical committee meeting results
- Waiting accreditation decision
- Receiving accreditation certificate



THANK YOU