# Laboratory Name:

# Date:

# Completed By:

# Participants (Name, Title):

Outline[[1]](#footnote-1)

# Executive Summary:

## Changes in Relevant Issues (Internal and External)

## Fulfillment of Objectives

## Short-term/Long-term Goals

## Highlights

# Suitability of Policies and Procedures:

## Quality Management System Documentation

* Quality Manual
	+ Quality Policy and Objectives (e.g., Competence, impartiality, consistent operations)
* Documentation, Process Systems, Procedures, Supporting Documents[[2]](#footnote-2), and Records
	+ Administrative Procedures (SAPs)
	+ Good Measurement Practices (GMPs)
	+ Operating Procedures (SOPs)
	+ Documentary Standards, Technical Procedures, Specifications (External Sources)
	+ Software
	+ Other

## Improvement Opportunities

# Reports:

## Previous Management Review(s)

* Outcome
* Status of Actions (Corrective & Improvement)
* Evaluation of Effectiveness of Actions

## Internal Audits

(Quality, Technical, Safety)

* Outcome
* Status of Actions (Corrective & Improvement)
* Evaluation of Effectiveness of Actions

## Other Corrective Actions

* Outcome
* Status of Actions (Corrective & Improvement)
* Evaluation of Effectiveness of Actions

## External Assessments

(Recognition, Accreditation, Customers)

* Outcome
* Status of Actions (Corrective & Improvement)
* Evaluation of Effectiveness of Actions

# Workload:

## Summary of Work Volume, Type, and Changes

* Customers (New, Returning)
* Areas of Measurement Scope, Number of Artifacts
* Trends (Increases, Decreases)
	+ How has your workload changed (increase/decrease)?
	+ Are you seeing trends in the workload (measurement area, artifact type)?
	+ Are you observing changes in customer requests (frequency, turnaround time needed)?
	+ Workload survey. Describe workload comparison with other labs (e.g., with similar scopes, region)?
	+ Changes in customers (quantity, industry sector)?
	+ Increase/decrease in out of state customers?
* Opportunities for Improvement
	+ Expand, improve, or discontinue measurement service(s) offered?

# Customer and Personnel Feedback:

* Sources may include: surveys, direct elicitation, benchmarking, focus groups, social media analysis, customer service notes, correspondence, suggestion box, website analytics, feedback/complaint forms, and cancelled services.
* Quantity, Trends (increase/decrease)
* Positive
* Negative (Complaints)
* Status of Actions (Corrective & Improvement)
* Evaluation of Effectiveness of Actions
* Opportunities for Improvement
	+ Identified customer needs?
	+ Process improvements?

# Other Relevant Factors:

## Resource Adequacy

(6.1) Describe the level of available resources that enable the laboratory to manage and perform its activities.

* Personnel (6.2 - Impartiality, competence requirements, selection, training, supervision, authorized signatories, monitoring of competence, demonstrated proficiency)
* Facilities and Environmental Conditions (6.3 - Suitability, monitoring, control, stability, upgrades, repairs, access, contamination, interference, incompatible activities)
* Equipment (6.4 - Access, handling, transport, storage, maintenance, purchase, repair, suitability)
* Metrological Traceability (6.5, Annex A)
	+ Standards (e.g., Calibrations needed, purchasing new standards for gaps)
	+ Measurement Assurance (e.g., Control charts, range charts)
	+ Procedures (e.g., Validation of new and laboratory developed)
* Externally Provided Products and Services (6.6 - Suitability, defining and reviewing requirements, evaluation, selection, acceptance criteria, competence, monitoring performance, re-evaluation)

## Risk Identification Results

* Impartiality (4.1 - Activities, organization and personnel relationships, elimination, minimization)
* Actions to Address Risks (8.5 - Enhance opportunities, avoid threats, prevent or reduce undesirable impacts and potential failures, achieve improvements)
	+ Identified Risks
	+ Evaluation of the Probability and Impact of Risks (e.g., Risk, probability, impact)
	+ Prioritization and Planned Actions
	+ Define Actions, Treatment of Risks
	+ Describe Integration and Implementation
	+ Evaluation of Effectiveness of Actions

## Assurance of the Validity of Results Outcomes

[7.7 - Review of results, detectable trends, monitor performance, proficiency testing (PT), and interlaboratory comparison (ILC)]

* Evaluation and Outcomes
	+ Highlights
	+ Internally Obtained Measurement Assurance Data (GLP 1)
	+ Externally Obtained Measurement Assurance Data (GLP 1)
		- PT Participation Plan (e.g., 5-year plan)
* Status of Actions (Corrective & Improvement)
* Evaluation of Effectiveness of Actions

## Other Relevant Factors

* Monitoring Activities
* Training (e.g., Planned and accomplished training, training application and effectiveness, personnel competency, authorized signatories, succession planning)

# Management Review Outputs:

## Record all Decisions and Actions Related to:

* Quality Management System Effectiveness
* Laboratory Processes Effectiveness
* Improvement of Laboratory Activities Related to Fulfillment of ISO/IEC 17025, NIST HB 143 (Recognition), and NIST HB 150 (Accreditation)
* Provision of Required Resources
* Any Need for Change

# Action Plan[[3]](#footnote-3)

## SUMMARY:

* Corrective Actions (CA) and Improvement Actions (IA) Identified

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Action Typea** |  | **Criteria** |  | **Priorityc** |  |
| **Finding Typeb and Description** |  |
| **Risk Assessment** |  |
| **Root Cause** |  |
| **Proposed Action** |  |
| **Due Date** |  | **Task Assigned To** |  |
| **Completion Date** |  | **Task Verified By** |  |
| **Final Action** |  |
| **Action Effectiveness** |  |
| **Evaluation Date** |  | **Task Verified By** |  |

Action Typesa: Corrective Actions (CA) and Improvement Actions (IA)

## Finding Typesb: Complaint (C), Internal Audit (A), LAP Problems (LAP), Employee Observations (EO). Priorityc:: High = 1, Intermediate = 2, and Low = 3

* Action Plan Log[[4]](#footnote-4)

| Action # | ActionType | Title | Description | Proposed Action | Assigned To | Goal Completion Date | Actual Completion Date |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

1. This report template describes the essential elements required by NIST Handbook 143 (2018) for laboratory recognition. A management review must be conducted at least once every 12 months, but can occur more frequently. [↑](#footnote-ref-1)
2. See the Laboratory Master List for approved processes, procedures, and supporting documents. [↑](#footnote-ref-2)
3. Copy and paste the table as needed for each action item that results from the Management Review. [↑](#footnote-ref-3)
4. Action Plan Log may be maintained electronically in a spreadsheet or database format. [↑](#footnote-ref-4)