

<p align="center"><b>ASSESSMENT CYCLE MATRIX - ISO/IEC 17025:2017</b>  <i>(Please record the number of NC's raised under the applicable clause in the Major or Minor row)</i></p>																
<b>Organization Name</b>																
<b>SADCAS Accreditation No.</b>																
<b>Team Leader</b>																
<b>Dates</b>										4 <sup>th</sup> Surveillance			Re-assessment			<b>Total No NCs/ Cycle</b>
<b>Types of assessment</b> (Initial, Periodic on-site assessment, Re-assessment, Extension, Re-instatement,.....)																
Extent of assessment: F: Full assessment of the clause P: Partial assessment of clause N: Not assessed	Extent: F/P/N	Major	Minor	Extent: F/P/N	Major	Minor	Extent: F/P/N	Major	Minor	Extent: F/P/N	Major	Minor	Extent: F/P/N	Major	Minor	
SADCAS Publications																
Previous Corrective Action(s) cleared																
4.1 Impartiality																
4.2 Confidentiality																
5. Structural Requirements																
6.1 Resource Requirements																
6.2 Personnel																
6.3 Facilities and Environmental Conditions																
6.4 Equipment																
6.5 Metrological Traceability																

<b>Dates</b>																
<b>Types of assessment</b> (Initial, Periodic on-site assessment, Re-assessment, Extension, Re-instatement, .....)																<b>Total No. NCs/ Cycle</b>
Extent of assessment: F: Full assessment of the clause P: Partial assessment of clause N: Not assessed	Extent: F/P/N	Major	Minor	Extent: F/P/N	Major	Minor	Extent: F/P/N	Maj or	Minor	Extent: F/P/N	Major	Minor	Extent: F/P/N	Major	Minor	
6.6 Externally Provided Products & Services																
7.1 Review of Requests, Tenders & Contracts																
7.2 Selection, Verification & Validation of Methods																
7.3 Sampling																
7.4 Handling of Test or Calibration Items																
7.5 Technical Records																
7.6 Evaluation of Measurement Uncertainty																
7.7 Ensuring the Validity of Results																
7.8 Reporting of Results																
7.9 Complaints																
7.10 Nonconforming Work																
7.11 Control of Data and Information Management																

<b>Dates</b>																
<b>Types of assessment</b> (Initial, Periodic on-site assessment, Re-assessment, Extension, Re-instatement, .....)																<b>Total No. NCs/ Cycle</b>
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8.1 Options A or B																
8.2 Management System Documentation																
8.3 Control of Management System																
8.4 Control of Records																
8.5 Actions to address Risks & Opportunities																
8.6 Improvement																
8.7 Corrective Actions																
8.8 Internal Audits																
8.9 Mngement Review																
MEDICAL EXTRAS																
1. Laboratory Computer System																
2. Laboratory Safety																

**SCOPE COVERAGE OF TESTS OVER THE ASSESSMENT**

*Please note: The coverage of tests over the accreditation cycle must include all tests on the scope of accreditation*

**Team Leader:**

**ASSESSMENT 1: Date & Type of assessment**

PERSONNEL WITNESSED	TESTS/CALIBRATIONS WITNESSED	TESTS/CALIBRATIONS: VERTICAL ASSESSMENTS	RECOMMENDATIONS/COMMENTS/ISSUES FOR FOLLOW-UP AT NEXT ASSESSMENT

**SCOPE COVERAGE OF TESTS OVER THE ASSESSMENT**

*Please note: The coverage of tests over the accreditation cycle must include all tests on the scope of accreditation*

**Team Leader:**

**ASSESSMENT 2: Date & Type of assessment**

PERSONNEL WITNESSED	TESTS/CALIBRATIONS WITNESSED	TESTS/CALIBRATIONS: VERTICAL ASSESSMENTS	RECOMMENDATIONS/COMMENTS/ISSUES FOR FOLLOW-UP AT NEXT ASSESSMENT

**SCOPE COVERAGE OF TESTS OVER THE ASSESSMENT**

*Please note: The coverage of tests over the accreditation cycle must include all tests on the scope of accreditation*

**Team Leader:**

**ASSESSMENT 3: Date & Type of assessment**

PERSONNEL WITNESSED	TESTS/CALIBRATIONS WITNESSED	TESTS/CALIBRATIONS: VERTICAL ASSESSMENTS	RECOMMENDATIONS/COMMENTS/ISSUES FOR FOLLOW-UP AT NEXT ASSESSMENT

**SCOPE COVERAGE OF TESTS OVER THE ASSESSMENT**

*Please note: The coverage of tests over the accreditation cycle must include all tests on the scope of accreditation*

**Team Leader:**

**ASSESSMENT 4: Date & Type of assessment**

PERSONNEL WITNESSED	TESTS/CALIBRATIONS WITNESSED	TESTS/CALIBRATIONS: VERTICAL ASSESSMENTS	RECOMMENDATIONS/COMMENTS/ISSUES FOR FOLLOW-UP AT NEXT ASSESSMENT

