Title: Management Review

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Author: Richard Cowie, QA Manager
QA Approval: Richard Cowie, QA Manager
Approver: Prof Paul Fowler, IMS Director
Approver: Prof Paul Fowler, IMS Director

Document History

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<th>Version</th>
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1. Scope

1.1 This SOP applies to staff involved in the preparation or performance of Management Review of the ISO/IEC 17025:2017 Quality Management System (QMS).

1.2 The Quality Assurance Manager (QAM) is responsible for implementing and maintaining the QMS. The QMS (comprising a Quality Manual, Quality Statement and SOPs) shall be used for testing activity, to ensure that they are conducted and that data generated, documented and reported, is in compliance with the requirements of ISO/IEC 17025:2017 (General requirements for the competence of testing and calibration laboratories).

1.3 All laboratory activities shall be undertaken impartiality and UoA shall not permit commercial, financial or other pressures to compromise impartiality. These shall be reviewed at the Management Review.

2. Responsibilities

Quality Assurance Manager
Managing the QMS on behalf of University of Aberdeen.
Ensuring a Management Review occurs at least annually.

3. Procedure

3.1 The QAM shall arrange regular Management Reviews. These shall take place at least annually but may occur more frequently if deemed appropriate by the QAM, Technical Manager or Institute of Medical Science (IMS) Director.

3.2 The Management Review shall be attended by the IMS Director, QAM and Technical Manager. Other persons may attend as deemed appropriate.

3.3 The QAM, or delegate, shall issue an agenda, minutes of any previous Management Review and any relevant papers and reports at least one week prior to the agreed date.

Uncontrolled when printed. Please ensure that you are working on the most up to date version of this SOP.

Key to symbols

● = Important point to note
⚠️ = Warning
3.4 The Management Review shall include:

- Any feedback from staff, customers and any other interested parties on the functioning of the QMS.
- Review of findings from any regulatory inspections.
- Review of non-conformances and observations raised during internal audits.
- Review of Deviations.
- Systematic findings and trends noted during audit.
- Effectiveness of Corrections and CAPA.
- Possible areas of improvement and future development of the QMS.
- Review of the Quality Statement for effectiveness.
- Staff training.
- Resource issues concerning the QMS.
- Review of stakeholder feedback and satisfaction surveys.
- Planned assessment and UKAS inspections.
- Impartiality of activities.

3.5 The QAM shall ensure minutes and an action table are generated. Action points shall have a timescale assigned (one month, unless exceptional circumstances).

4. Abbreviations and definitions

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<thead>
<tr>
<th>Abbreviation</th>
<th>Definition</th>
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<tbody>
<tr>
<td>CAPA</td>
<td>Corrective Action, Preventive Action</td>
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<td>QAM</td>
<td>Quality Assurance Manager</td>
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<td>QMS</td>
<td>Quality Management System</td>
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<td>UKAS</td>
<td>United Kingdom Accreditation Service</td>
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5. Related documentation and references

TMP-QA-63 Management review agenda