



**ACCREDITATION SCHEME
FOR
LABORATORY MANAGEMENT SYSTEM (LMS)
TRAINING INSTITUTIONS**

**NATIONAL ACCREDITATION BOARD FOR
EDUCATION AND TRAINING (NABET),
QUALITY COUNCIL OF INDIA (QCI)**

Capacity Building



ABOUT QCI/NABET

Quality Council of India (QCI) was set up jointly by the Government of India and the Indian Industry represented by the three premier industry associations i.e. Associated Chambers of Commerce and Industry of India (ASSOCHAM), Confederation of Indian Industry (CII) and Federation of Indian Chambers of Commerce and Industry (FICCI), to establish and operate national accreditation structure and promote quality through National Quality Campaign. QCI is registered as a non-profit society with its own Memorandum of Association. QCI is governed by a Council of 38 members with equal representations of government, industry and consumers. Chairman of QCI is appointed by the Prime Minister on recommendation of the industry to the government. The Department of Industrial Policy & Promotion, Ministry of Commerce & Industry, is the nodal ministry for QCI.

It functions through the executive boards in the specific areas i.e. Accreditation for

- a. Conformity Assessment Bodies
- b. Healthcare Establishments
- c. Education & Vocational Training Providers

In addition it has an exclusive Board for promotion of Quality.

National Accreditation Board for Education and Training (NABET), one of the constituent Boards of QCI, offers accreditation to the Training Courses/Course Providers in various areas including Quality Management Systems, Environment Management Systems, Occupational Health and Safety Auditors etc. NABET also accredits EIA Consultant Organisations, schools, Industrial Training Institutes and Vocational Training Providers.

NABET has mutual recognition arrangements with RABQSA-Australia, ANSI-USA and SQA-Scotland.

Contents

1.	ABBREVIATIONS	4
2.	GENERAL INFORMATION	5
2.1	BACKGROUND FOR THE SCHEME	5
2.2	AN OUTLINE OF THE SCHEME	6
2.3	OBJECTIVES OF THE SCHEME	6
3.	ACCREDITATION REQUIREMENTS AND PROCESS	7
3.1	ELIGIBILITY FOR TRAINING INSTITUTIONS.....	7
3.2	FACULTY	7
3.3	SCOPE OF ACCREDITATION AND EVALUATION CRITERIA.....	7
3.4	INFRASTRUCTURE.....	8
3.5	TRAINING QUALITY ASSURANCE SYSTEM (TQAS)	8
4.	ASSESSMENT AND ACCREDITATION PROCESS	9
4.1	APPLICATION PROCESS	9
4.2	ASSESSMENT PROCESS.....	9
4.3	ACCREDITATION CRITERIA.....	10
4.4	EXPANSION OF SCOPE.....	10
5.	TERMS & CONDITIONS TO MAINTAIN ACCREDITATION	11
5.1	COMPLIANCE TO THE CONDITIONS OF ACCREDITATION.....	11
5.2	SUSPENSION OR CANCELLATION OF ACCREDITATION	11
5.3	CODE OF CONDUCT.....	12
5.4	COMPLAINTS AND APPEALS.....	12
5.5	PAYMENT OF FEES.....	12
5.6	GOVERNANCE.....	13
5.7	CONFIDENTIALITY.....	13
5.8	USE OF QCI/NABET LOGO	13
6	FEE STRUCTURE	14
6.1	PAYMENT OF FEES.....	14
7	APPENDICES	15
	APPENDIX 1: EXPERIENCE AND QUALIFICATIONS REQUIREMENT OF FACULTY MEMBERS.....	15
	APPENDIX 2: BROAD GUIDELINES FOR DEVELOPING TRAINING QUALITY ASSURANCE SYSTEM (TQAS).....	16
	APPENDIX 3: ASSESSMENT PROCESS.....	18
8	ANNEXURES	19
	ANNEXURE 1: APPLICATION FORM	19
	ANNEXURE 2: DECLARATION OF ACCEPTING NABET'S CODE OF CONDUCT.....	25
	ANNEXURE 3: FACULTY RESUME FORMAT.....	26
	ANNEXURE 4: VISITING FACULTY MOU/AGREEMENT.....	29
	ANNEXURE 5: TRAINEES FEEDBACK FORM	30

1. ABBREVIATIONS

AC	Accreditation Committee
AI	Applicant Institution(s)
ASSOCHAM	Associated Chambers of Commerce
ATI	Accredited Training Institution
CAPA	Corrective Action & Preventive Action
CII	Confederation of Indian Industry
CV	Curriculum vitae
DA	Desktop Assessment
EMP	Empanelled
FICCI	Federation of Indian Chambers of Commerce and Industry
IA	Initial Assessment
IH	In- house
ISO	International Organization for Standardization
LA	Lead Assessor
LMS	Laboratory Management System
MOU	Memorandum of Understanding
NABL	National Accreditation Board for Testing and Calibration Laboratories
NABET	National Accreditation Board for Education & Training
NGO	Non-Government Organization
NC	Non- conformance
OA	Office Assessment
Obs.	Observations
PATI	Provisionally Accredited Training Institution
QCI	Quality Council of India
QMS	Quality Management System
RA	Re-Accreditation
SA	Surveillance Assessment
TA	Technical Assessor
TC	Technical Committee
TOR	Terms of Reference
TI	Training Institution
TQAS	Training Quality Assurance System
VF	Visiting Faculty

2. GENERAL INFORMATION

2.1 BACKGROUND FOR THE SCHEME

Accreditation of laboratories in India is assisting the Indian industry in all sectors in generating internationally accepted test data and in enhancing the quality and reliability of products both in the domestic and export markets, thereby, catalysing the growth of Indian economy. Earlier WTO has identified non-acceptance of test results and measurement data as Technical Barrier to Trade (TBT) and accreditation is considered to be the first essential step towards removing such technical barriers.

Laboratory accreditation through third-party assessment is formally recognizing the technical competence of laboratories. The accreditation is granted by NABL to testing & calibration laboratories based on ISO/IEC 17025 and medical laboratories based on ISO 15189. NABL is signatory to Asia Pacific Laboratory Accreditation Cooperation (APLAC) and International Laboratory Accreditation Cooperation (ILAC) Mutual Recognition Arrangements (MRAs) for Testing, Calibration and Medical laboratories. The test and measurement data produced by accredited laboratories are acceptable amongst other MRA signatory economies in the world.

Laboratory accreditations are being provided in all major fields of Science, Engineering and Medical testing laboratories. There are many accredited laboratories in India and in neighbouring countries and very large number of laboratories are in process or in planning for accreditation in near future.

Laboratories require its personnel to have appropriate understanding on the requirements of Laboratory Management System (LMS) for accreditation purpose and thus will need imparting necessary training on the relevant conformity assessment standard to its personnel.

The shortage of trained personnel having adequate understanding on the relevant laboratory management system and conformity assessment standard is being highlighted in conferences or in discussions in different forums. Some of the institutes and individuals are conducting such training programmes for laboratory personnel. The capability and competence to design and deliver such programs needs to be ascertained. The quality of such training programs will have a direct bearing on the quality of laboratory personnel and the work they do to achieve or maintain laboratory accreditation. An attempt is made to prepare uniform structure for designing and conducting such training programmes.

Therefore, there is a need for a well-designed accreditation scheme which defines the requirements for training providing institute on infrastructure, competence of human resources, course curriculum, trainee evaluation process, training quality assurance system, system oriented approach etc. This will facilitate in providing competent and resourceful accredited LMS training institutes for training the laboratory personnel. It will ultimately contribute towards improving and standardizing the quality of LMS trainings and thus the competence in laboratories.

2.2 AN OUTLINE OF THE SCHEME

NABET is proposing an accreditation Scheme for LMS training institutions. The scheme is aimed to create an independent, transparent and impartial accreditation system for institutions engaged in imparting specialized trainings pertaining to laboratories. Qualified and experienced laboratory staff(s) desirous of enhancing their knowledge and skills of laboratory management systems is going to be the main beneficiary of such training programmes by accredited training institutions. Trained manpower/ quality manager/ technical manager is required by laboratories (testing/diagnostic), industry, NGOs, law firms, financial institutions, research bodies , administrators, governments, ministries, Pollution Control Boards and all those concerned with testing of products, medical diagnostic labs etc.

Scheme is dynamic in nature. Modifications and updation will take place from time to time, as it ought to be for continually improving the delivery and effectiveness of the training.

2.3 OBJECTIVES OF THE SCHEME

- a. To provide accreditation to institution capable of providing short term specialised LMS training programmes for persons involved in/wishing to make a career in the field of laboratories.
- b. To encourage progressive improvement in LMS training course content, pedagogy, teaching methodology, experiential learning through case studies and other innovative mechanisms.
- c. To ensure quality and effectiveness of LMS courses and training delivery system by the accredited Institutions.

3. ACCREDITATION REQUIREMENTS AND PROCESS

3.1 ELIGIBILITY FOR TRAINING INSTITUTIONS

Any legally identifiable institution/organisation engaged in the field of education/training/capacity building for laboratory personnel with requisite human resource and other facilities can apply for accreditation under the Scheme.

3.2 FACULTY

- a. Requirements in respect of qualification and experience of Faculty in relation to specific training programme are laid down in **Appendix 1**.
- b. Training organiser (coordinator faculty in-house) shall be present during the complete training and should be responsible for organising, conducting, evaluating and for all other activities related to the training.
- c. List of proposed faculty (with backup faculty if possible) with her/his identified competence, their topics and schedule should be prepared and submitted along with the application form. Other than one in house training organiser (coordinator faculty), other faculty members may be in-house or empanelled/ visiting faculty with the applicant institution. For empanelled/ visiting faculty, there should be a written agreement/MOU between the institution and faculty members including the aspects mentioned in **Annexure 4**.
- d. One visiting faculty may be associated with maximum four institutes.
- e. Two faculty members must be available in the training area if participants are more than 10 in class room or during any exercise/case study/ group discussion etc.

3.3 SCOPE OF ACCREDITATION AND EVALUATION CRITERIA

An Applicant Institution (AI) is expected to satisfy the requirement of faculty, course curriculum, training material, case studies, evaluations etc. in respect of the training programme for which accreditation is sought.

- a. AI is required to choose training programme for accreditation (ISO 17025/15189) depending on available resources and facilities available with them. AI may select any one and/or both programmes:
 - Testing Laboratories and Calibration Laboratories (ISO/IEC 17025)
 - Medical Laboratories (ISO 15189)
- b. The Applicant Institutions (AIs) shall prepare the detailed curriculum and submit along with application. The programme should be judicious mix of class room training and case study exercises. These may comprise forming groups, giving different exercises to the groups, presentations by groups followed by discussions. Films, role play and other modes may also be adopted. Course materials including case studies may preferably be sent to the trainees in advance or must be provided at the start of the training if not sent in advance.

- c. While conducting the training programme care should be taken to ensure that each trainee is given the due attention. Evaluation of the trainees should be based on marks obtained during continuous evaluation and assessment at the end of training preferably in the following ratio –
- i. Continuous evaluation - 50%
 - ii. Evaluation at the end of training (mix of subjective & objective) - 50%
- d. For successful completion of training, a trainee is required to secure a minimum average 60% of the total marks, provided a minimum of 50% marks are secured in both (i and ii) evaluations as specified above. All participants will get certificate of participation on last day of training. Merit certificate will be issued by institution to the successful trainees mentioning the marks obtained by the candidate. These certificates should be sent by post/courier to successful trainees.

3.4 INFRASTRUCTURE

Institution(s)/Organisation(s) wishing to apply for accreditation under this Scheme should have some of the following infrastructural facilities:

- a. Class room(s)/ lecture hall with comfortable and ergonomic seating capacity of 10-15% extra than the enrolled candidates (adequate space for conducting the training, sitting for faculty/observers). Batch size should not be bigger than 25 participants
- b. Faculty room
- c. Contemporary training aids (as projectors, white board, markers, flipchart, audio, video facilities etc.) including requisite software
- d. Arrangements for working lunch, tea/coffee
- e. Institutions having lodging facilities or appropriate facilitation will be of advantage
- f. Visit to a laboratory will be of advantage
- g. If institute wants to conduct trainings at multi locations, these should be mentioned in application with details of faculty, infrastructure etc.
- h. Organisations using the infrastructure of other institute shall have MOU for infrastructure and agreement for NABET team to access these facilities

3.5 TRAINING QUALITY ASSURANCE SYSTEM (TQAS)

The applicant institution (AI) should have quality assurance system for continually improving the content, delivery and effectiveness of training. It could be based on Quality Management System (QMS) as prescribed in ISO 9001:2008 standards, however TQAS of the organization should have the procedures prescribed below:

- i. Procedure for evaluating, selecting and appointing faculty members for the training
- ii. Procedure for organizing and conducting training programme
- iii. Procedure for collecting feedback, analysis and evaluation of feedback for improving the content, delivery and effectiveness of future training programmes
- iv. Procedure for addressing complaints, suggestions and conflict of interest.
- v. Procedure for periodic reviewing the curriculum and training materials
- vi. Procedure for maintaining records and documents related to training.
- vii. Procedure for ensuring the implementation of all the above procedures

Refer suggested guidelines - **Appendix 2.**

4. ASSESSMENT AND ACCREDITATION PROCESS

4.1 APPLICATION PROCESS

Details of the accreditation scheme and the Application Form (**Annexure 1**) are posted on the NABET/QCI website. Any institution desirous to get accredited under this scheme should carefully go through the requirements of the Scheme, processes and assess their own adequacy and take care of shortfalls, if any, before applying.

Application form complete in all respects giving relevant details of application fee can be sent in a soft copy, however, a hard copy of the same application form (Annexure 2 only) along with application fee should be sent to –

The Chief Executive Officer,
National Accreditation Board for Education & Training,
Quality Council of India, Institute of Town Planners India, 6th Floor,
4 A, Mahatma Gandhi Road (Ring Road), New Delhi - 110 002, India
Tel: +91 11 233 23 416 / 417 / 418 / 419 / 420 Fax: +91 11 233 23 415
nabet@qcin.org, hari@qcin.org,

Hard copy of any other document may have to be submitted if asked for by NABET, subsequently. NABET Secretariat will inform the AI of any clarification/additional information that may be required for completeness of the application.

4.2 ASSESSMENT PROCESS

Assessment Process comprises three parts:

1. Initial Assessment -

- a) **Application Completeness:** Submitted application shall be reviewed by NABET secretariat for its completeness. Inadequacies in application (if any) shall be informed to applicant institution. AI should submit complete response within 30 days. Only completed applications will be further processed.
Note 1: If inadequacies are found in the response, the same will be communicated with an additional time of 30 days. If AI fails to submit satisfactory response even after additional time then the application is made inactive.
Note 2: The inactive period will be for 60 days. The AI may submit satisfactory response in the given time. If the response is not satisfactory then the application will be treated as closed and the AI has to re-apply with full fees.
- b) **Desktop Assessment:** NABET assessor conducts adequacy assessment (application & technical assessments of documents submitted by AI). Observation(s) and NCs (if any) would be communicated by NABET secretariat. AI should submit complete response within 30 days. Decision regarding provisional accreditation would be communicated.
Note 3: Closure of NCs and observations submitted by AI will be verified by NABET assessor.
Note 1 & 2 given under a) will be followed for timelines.
- c) **Office and Witness Assessment:** On-site office and witness assessment includes interaction with each faculty (in house and visiting) /quality manager, concerned administrative staff etc., verification of infrastructure, implementation of training quality assurance system, witness of course delivery and trainees feedback.

Assessment report [findings like observation(s) and NCs (if any)] would be reported by NABET assessors to NABET secretariat and in turn communicated to AI. Corrective measures shall be submitted by AI within 30 days. Decision regarding grant/denial of accreditation would be communicated.

Note 4: Closure of NCs and observations submitted by AI will be verified by NABET assessor.

2. Surveillance Assessment – If there is no change in faculty, course curriculum, quality manual, infrastructure, scope etc. then ATI shall pay surveillance fee and inform NABET for due surveillance, ATI need not to submit new application.

If there is any change in faculty, course curriculum, quality manual, infrastructure, modification of scope etc. then new application with updated details and applicable fee shall be submitted and same process as above will be followed.

SA will be conducted with particular emphasis on performance, quality of training delivery, implementation of TQAS, compliance to conditions of accreditation. SA to be carried out between 15-18 months from the date of provisional accreditation.

3. Re-Accreditation – Process will be similar as initial assessment, with particular emphasis on performance, feedback by trainees, continual improvement, TQAS etc. in three years from the date of provisional accreditation. RA application shall be submitted 3 months prior to RA due date. RA process shall be completed before the expiry of accreditation to avoid any discontinuation of accreditation (**Appendix 3**)

4.3 ACCREDITATION CRITERIA

Accreditation under this criterion will be completed in two phases:

1. Phase I – On the basis of desktop assessment (DA), report by assessor(s) and satisfactory closure of NCs and observations, if any, the cases shall be compiled and circulated to the Accreditation Committee (AC). On approval by the AC, a provisional accreditation shall be granted. Provisionally Accredited Training Institution (PATI) may announce training programme as per provisionally accredited scope and shall inform NABET the commencement date of the first programme to enable NABET to arrange the witness assessment by NABET assessor(s).

The first training programme subsequent to provisional accreditation will be subjected to office and witness assessment by the assessor(s) deputed by NABET. Number and Duration of office and witness assessment depend upon the scope of the provisional accreditation and the nature of training programme.

2. Phase II - Based on office and witness assessment report, NCs and observation, if any, shall be communicated to the AI for the compliance. AI shall submit evidence based compliance of NCs and observations at the earliest but not later than a month. If required additional office and witness assessment may be required for verification of closures. The case then shall be placed before AC for converting provisional accreditation into final accreditation.

Accreditation period of three years will be counted from the date of provisional accreditation; however, this validity period is subject to satisfactory SA.

4.4 EXPANSION OF SCOPE

Any expansion in scope can be made by making a written request to NABET secretariat at any time. PATI/ATI must submit a complete application with required fee for seeking expansion including additional improvements, resources, facilities now implemented based on which expansion is sought.

5. TERMS & CONDITIONS TO MAINTAIN ACCREDITATION

5.1 COMPLIANCE TO THE CONDITIONS OF ACCREDITATION

- a) Accreditation period of three years shall be counted from the date of provisional accreditation; however, this validity period is subject to satisfactory SA.
- b) ATI shall submit complete SA/RA application three months prior to due date (18/36 months from the date of provisional accreditation) to maintain the accreditation continuity.
- c) Accreditation shall expire at the end of its validity unless renewal is sought in time.
- d) All payments shall be made in advance.
- e) Franchising, licensing, subcontracting, merger, acquisition of NABET accredited programme(s) is NOT permissible.
- f) ATI shall inform NABET with a copy of programme just after the programme announcement, name of the training programme, dates, names of faculty, venue, expected number of participants, study material, presentations etc.
- g) ATI shall submit to NABET a soft copy of registered participants on the first day of the programme start and a copy of successful candidates with certificate number after the result announcement.
- h) Any change in faculty, employment status, curriculum etc. shall be informed to NABET within 15 days with relevant documents.
- i) ATI just after accreditation shall sign the 'Code of Conduct' (Annexure 3) and send it to NABET Secretariat.
- j) The ATI shall maintain relevant records of all trainings conducted including the following in hard or soft format –
 - i. Name of the training programme, dates, names of faculty, venue, study material, presentations, training photos etc.
 - ii. List of participants, signed attendance sheet, marks obtained in evaluation, feedback of participants and its analyses by ATI.

5.2 SUSPENSION OR CANCELLATION OF ACCREDITATION

NABET shall suspend or cancel an accreditation on account of any or more grounds during accreditation process or after, but not limited, to the following:

- a) Non-compliance, violation of the NABET requirements, conditions of Accreditation
- b) Deviation from facts as stated in application and enclosures
- c) Submission of false or misleading information in the application or in subsequent submissions
- d) Improper use of NABET Accreditation mark.
- e) Carrying out changes in faculty members/ course content without NABET's approval
- f) Failure to report any major legal (mandatory compliance) changes
- g) Using fraudulent practices by the accredited training institution (ATI) in respect of its submission/ interaction with NABET which would include, but not limited to, deliberate concealment and/or submission of false or misleading information, suppression of information, falsification of records or data, unauthorized use of accreditation, and non-reporting of complaints against training institutions to NABET.
- h) Non- payment of applicable fees in time to NABET.
- i) Not submitting SA/RA application in time.
- j) Franchising, licensing or subcontracting of course/ programmes
- k) Any other condition deemed appropriate by NABET

5.3 CODE OF CONDUCT

All ATIs are obliged to improve the standing of the profession by rigorously observing the Code of Conduct. Failure to do so may result in the suspension or cancellation of accreditation.

The ATI undertakes:

- a. To act professionally, accurately and in an unbiased manner.
- b. To be truthful, accurate and fair to the assigned work, without any fear or favour.
- c. To judiciously use the information provided by or acquired from the applicant and to maintain the confidentiality of information received or acquired in connection with the assignment.
- d. To avoid and / or declare any conflict of interest that may affect the work to be carried out.
- e. Not to act in a manner detrimental to the reputation of any of the stakeholders including NABET and the trainee.
- f. To co-operate fully in any formal enquiry procedure of NABET
- g. No sharing of the contact details of Trainees with other laboratory/ organisation/company.

5.4 COMPLAINTS AND APPEALS

- i. The ATI shall establish documented procedures for handling and disposal of complaints and appeals within a reasonable time. The documented procedure shall include provision for :
 - a) Providing information regarding complaint handling process / appeals to all interested parties
 - b) Acknowledgement of complaints/appeals
 - c) Complaint analysis/ investigation for redress of complaint/appeals.
 - d) Communication with the complainant/appellate for satisfactory closure of the complaint/appeal.
 - e) Involvement of NABET in unresolved complaints or appeals if any.
- ii. The ATI shall maintain records of all complaints and appeals and their resolutions including actions taken.
- iii. All complaints and appeal to be assessable to NABET assessment.

5.5 PAYMENT OF FEES

Details of fee structure are given in Section 6.

- a. The fees are to be paid by a Demand Draft payable at Delhi or a local Cheque of Delhi in favour of "Quality Council of India".
- b. Application fee has to be sent along with the application. Applications not accompanied by the application fee will not be processed further.
- c. Any pending fee payments must be made before finalising the date of assessment.
- d. Annual Accreditation shall be paid every year (from the date of provisional accreditation).
- e. No SA, re- accreditation, issuance of certificate etc. if dues are pending.
- f. The fees are not refundable
- g. Service Tax – extra as applicable.

5.6 GOVERNANCE

QCI-NABET reserves the rights with respect to training modules development, implementation, coordination, management of these Training programmes through Training Institutions. QCI-NABET will have following functions (but not limited to):

- a. Development and Implementation of Training Modules through Training Institutions
- b. Changing/ modifying the criteria/ guidelines/ fee structure
- c. Suspension/cancelling of accreditation in case of violation of any clause of the Scheme
- d. Surprise visits/ extra witness assessments

5.7 CONFIDENTIALITY

- a. All information, documents submitted by an applicant to NABET shall be used by NABET (including NABET Assessors and Members of Accreditation Committee) for the purpose of assessment & accreditation only. These may also be used for research purpose or sharing with any ministry, HRD, NABL, ILAC, APLAC and other members of the International Personnel Certification Association. However, the identity of the accredited training institutions would be protected for sensitive information related to business whenever it is called for/ appropriate. In case an AI/TI wants the information to be kept confidential, a communication shall be sent to NABET citing reasons for the same. NABET reserves the right to take decision in this regard.
- b. ATI shall have adequate arrangements consistent with applicable laws to safeguard confidentiality of all information provided by stakeholders.
- c. The accredited institution should maintain confidentiality of their trainees related information like marks, evaluations, question paper, feedback form, answer sheets, personal details etc.

5.8 USE OF QCI/NABET LOGO

NABET Logo can be used by Accredited Institutions and is restricted only to the training course (s) accredited by NABET.

NABET logo can be used by ATI only at following places:

- a) On promotional material and study material stating that the course is accredited by NABET, certificate for successful trainees, and mentioning course accreditation number.
- b) On letter head and visiting cards mentioning that the organization is accredited by NABET for the specific training modules.
- c) On certificate issued to candidates clearly stating the course accreditation number.
- d) ATI should ensure that NABET logo should not be used to the courses until accredited by NABET.
- e) On suspension, withdrawal, after expiry of accreditation validity, earlier accredited institution must not use NABET logo. It may attract legal implications.

6 FEE STRUCTURE

Fees will be charged to the AI under the following heads:

Institute Conducting Training Programme(s) in a year	Application fee for accreditation or re-accreditation (Rs.)		Office & witness Assessment Fee (Rs.)		Annual Fee per year (Rs.) (3 fee in 3 years)		Surveillance Fee (Rs.) (15-18 months)	
	Any one ISO 17025 or 15189	Both ISO 17025 & 15189	Any one ISO 17025 or 15189	Both ISO 17025& 15189	Any one ISO 17025 or 15189	Both ISO 17025& 15189	Any one ISO 17025 or 15189	Both ISO 17025& 15189
Upto 3 program in a year for each	40000	70000	24000	48000	40000	70000	40000	70000
4-5 program in a year for each	60000	105000	24000	48000	60000	105000	60000	105000
6-10 program in a year for each	90000	150000	24000	48000	90000	150000	90000	150000
>10 program in a year for each	120000	200000	24000	48000	120000	200000	120000	200000

- Travels by air economy class or 2T AC if no air connection, Three to Four star hotel boarding and lodging charges (to be borne by the AI at actual). If any deviation, then with the consent of AI.
- If closure of NCs/Observations require extra office/ witness assessment or for any additional verification visit that will be charged extra Rs. 12000/ Per person day
- Expansion of scope or modification of scope in SA, conducting more training then above fee will be applicable.
- Any change in certificate with respect to scope, premises, faculty, address etc. will be charged Rs. 2000/-.

6.1 PAYMENT OF FEES

- The fees are to be paid by a Demand Draft payable at Delhi or a local Cheque of Delhi in favour of "Quality Council of India".
- Application fee has to be sent along with the application. Applications not accompanied by the application fee will not be processed further.
- Any pending fee payments must be made before finalising the date of assessment.
- Annual Accreditation shall be paid every year (from the date of provisional accreditation).
- No SA or renewal of accreditation if dues are pending.
- The application fees are not refundable
- Service Tax – extra as applicable.

7 APPENDICES

APPENDIX 1: EXPERIENCE AND QUALIFICATIONS REQUIREMENT OF FACULTY MEMBERS

Faculty for ISO/IEC 17025 (TESTING LABORATORIES & CALIBRATION LABORATORIES)

i. Qualification

- a. Bachelor Degree in Engineering / Technology or Master degree in Science

ii. Experience

- a. Overall experience of 15 years out of which minimum 5 years in the laboratory testing activities as well as minimum 2 years experience in conduct of training programs for LMS.
- b. Conducted minimum 40 NABL assessments out of which at least 30 assessments as Lead Assessor.

OR

Overall experience of 15 years out of which minimum 4 year experience in development, documentation and implementation of accreditation scheme(s) as full time staff with accreditation body as well as minimum 2 years experience in conduct of training/awareness programs.

Faculty for ISO 15189 (MEDICAL LABORATORIES)

i. Qualification

- a. Master degree in laboratory medicine / Clinical Pathology/ Haematology/ Clinical Bio Chemistry/ Clinical Microbiology/ Molecular Biology/Genetics/Cytogenetic /Serology / Histopathology/ Cytology

ii. Experience

- a. Overall experience of 15 years out of which minimum 5 years in medical testing activities as well as minimum 2 years experience in conduct of training programs for LMS
- b. Conducted minimum 25 NABL assessments out of which at least 20 assessments as lead assessor.

OR

Overall experience of 15 years out of which minimum 4 years' experience in development, documentation and implementation of accreditation scheme(s) as full time staff with accreditation body as well as minimum 2 years experience in conduct of training/awareness programs.

APPENDIX 2: BROAD GUIDELINES FOR DEVELOPING TRAINING QUALITY ASSURANCE SYSTEM (TQAS)

The applicant organization must develop and maintain a Quality Management System (QMS) based on ISO 9001:2008 standards. It is, however, not mandatory that organization should be ISO 9001:2008 certified. The QMS of the organization must address specific requirements this accreditation process.

- i. Procedure for Evaluating, Selecting and appointing faculty members for the training
- ii. Procedure for Organizing and conducting training programme
- iii. Procedure for feedback collection, evaluation of feedback, Evaluating output/ improvements after Training
- iv. Procedure for addressing complaints and suggestions.
- v. Procedure for maintaining records and documents including training materials
- vi. Procedure for periodic reviewing the curriculum and training materials
- vii. Procedure for ensuring the implementation of all the above procedures

Some broad guidelines on issues to be addressed for each of the above items are given below:

I Procedure for evaluating, selecting, appointing faculty members – should give procedures for

- a. Prescribing qualifications and experience requirements for faculty/resource persons (internal/ external)
- b. Assessing performance of a candidate for faculty/resource person prior to appointment.
- c. Assessing performance of a faculty/resource person after appointment
- d. Identifying training areas of improvements for faculty/resource person
- e. Fixing Terms of Reference for retention and guidelines for a) Imparting training b) Code of conduct and Conflict of Interest

II Procedure for organizing and conducting training programme: should give procedures for

- a. Organizing a Training Programme including announcing the programme, defining minimum infrastructure requirements in terms of Conference space, seating, projectors, study material etc.
- b. Defining roles and responsibilities of the Programme Coordinator and support system to coordinator
- c. Continuous evaluation of trainees and test papers to be used at the end of the programme
- d. Online portal giving information about a) Brief coverage of concerned training programme covered, b) Faculty, c) Dates of Course, d) Facilities (Food/ residential/ non-residential etc.), e) Fees
- e. Developing the Course Materials, it must include the relevant training programme.

III Procedure for Feedback collection, evaluation and improvements – giving procedures for

- a. Inviting feedback on Training imparted from participants in specific formats to assess faculty competence, mode of delivery, effectiveness etc.
- b. Evaluating the feedback for areas of strengths and improvements in respect of arrangements/facilities and quality of training
- c. Corrective & preventive actions for gaps on arrangements/facilities
- d. Action to be taken to close the gap on quality of training including changing the concerned faculty, if required
- e. Updating the test papers, as necessary

- IV Procedure for addressing complaints, suggestions and conflict of interest** –Applicable to training institution
- a. Informing the stakeholders about the provision of complaints, appeals and conflict of interest
 - b. Accepting complaints/ appeals
 - c. Handling and disposal (including authority and responsibility) of the same within reasonable time
 - d. Maintaining records of complaints/ appeals
 - e. Ensuring implementation of preventive/ corrective actions

V Procedure for maintaining records and documents including training material:

- a. Approving documents prior to issue
- b. Up-dation of documents, as required
- c. Ensuring quick availability of relevant revision of the document
- d. Maintaining course specific records of venue, date, promotional literature, faculty/resource persons involved, identification of the test papers used, name, contact details & test results of each participant, unique number of certificates issued
- e. Storage, protection, retrieval and disposal of documents

VI Procedure for periodic reviewing the curriculum and training materials

- a. Review of actions pending from last review
- b. Action on feedback from stakeholders to update course curriculum
- c. Updating of amendments in rules/laws, new case studies, latest scenario
- d. Updating as per new environmental aspects and impacts
- e. Administrative issues including future programmes.

VII Procedure for ensuring the implementation of above all procedures

APPENDIX 3: ASSESSMENT PROCESS

Assessment Process comprises three parts:

- **Desktop/Initial/Office/Witness Assessment** – completeness of application, technical assessments of documents submitted and office assessment including interaction with faculty and concerned administrative staff. Witness of course delivery
- **Surveillance Assessment** – Same as above, with particular emphasis on performance, quality of training, compliance to conditions of accreditation, carried out between 12-18 months after initial accreditation.
- **Re-Accreditation** – same as 1st assessment, with particular emphasis on performance during the accreditation cycle including feedback by trainees, after 3 years of initial accreditation.

Initial Accreditation

Aspects to be considered and their weightage:

For Provisional Accreditation –

1	Course Curriculum/ desktop assessment/Faculty no., competence of faculty available with Applicant Institution	20%
2	Infrastructural facilities of Applicant Institution	10%
3	Training Quality Assurance System	15%
4	Criteria of evaluation of participant	5%

For full Accreditation –

(Observing conduction of minimum 1 training programme)

1	Coverage of the course curriculum submitted with application to NABET	15%
2	Quality of the content of the training	10%
3	Quality of case studies/ exercises	10%
4	Observation of the TQAS	5%
5	Feedback from Trainees	10%

8 ANNEXURES

ANNEXURE 1: APPLICATION FORM

**APPLICATION FORM
FOR
ACCREDITATION SCHEME FOR
LABORATORY MANAGEMENT SYSTEM (LMS) TRAINING
INSTITUTIONS**

Name of the Institution: _____

Scope ISO/IEC 17025

ISO 15189

Application Submitted to

National Accreditation Board for Education and Training

Quality Council of India

Institute of Town Planners India, 6th Floor

4 A, Mahatma Gandhi Road (Ring Road)

New Delhi - 110 002, India

Tel +91 11 23323416 – 20, Fax +91 11 23323415

GENERAL INSTRUCTIONS

- All columns of application form must be filled up in legible handwriting, typed or printed.
- Copies of all the relevant documents should be sent with the application

A. General information about the Training Institution

1. Name of Institution _____

2. Postal Address _____

_____ City _____

Pin Code _____ State _____

Phone No. with STD Code: _____

Fax No. : _____ Email: _____

3. Year of Establishment -

4. Name of the Head of the Institution -

5. Contact person -

Name: _____

Address: _____

Tel No. _____ Mobile _____

Email _____



6. Year of Institution's Establishment

6.1 Details of Training imparted in LMS related field -

a. Total No. of participants trained so far (ISO/IEC 17025/ISO 15189)

b. Detailed break up (Year wise and scope wise) as per table below

Sr. No.	Areas in which training imparted	Year	Duration with dates	No. of Participants

7. Other services provided by Institution / activities of the institution (if any)

S.No.	Item	Number of Rooms	Aprox. Area (in sq. mts)
i.	Classrooms with seating capacity of minimum 30 persons*		
ii.	Staff Rooms*		
iii.	Library*		
iv.	Laboratory**		
v.	Other Rooms/ Hall		
vi.	Power Backup		

***Attach photographs/video from different angles covering the facilities (As enclosure 4)**

****Provide the details of your lab or details of associated lab (having MOU/agreement)**

b. Other Facilities:

S.No.	Facilities*	Available (Yes/No)	Nos.
1	Audio-Video facilities available in the Institution – LCD/ /Computers/ Projector/ Speakers etc.		
2	Photocopiers/printers etc.		
3	White boards/ flip charts for discussions		
4	Facility / support for arranging facilities (transportation, accommodation reservation etc.)		

***Attach photographs from different angles (Enclosure 5)**

14. Academic Facilities –

14.1 Summary of personnel involved in training programme –

- i. In house Faculty –
- ii. Empanelled/ Visiting Faculty –
- iii. Administrative staff -

(Note: Attach list of proposed faculty with their CV as per format IV in application)

Sl. No.	Name	IH/ Emp.	Educational Qualification	Training Certificates, if any	Testing experience (Years)	Experience as faculty (Years)	Industry Experience (Years)

Kindly ensure that the proposed faculty meets the qualification and experience requirements as prescribed in the Appendix 1 of the Scheme.

15. Do the Institution /Organization comply with regulatory norms for health and sanitary conditions, drinking water and fire safety? YES/NO
(Pl attach relevant documents – **Enclosure 6**)

E. Other Relevant Information

16. Does the Institution receive any grant from Govt. of India / State Government / Union Territory or any other source?
(Attach – Enclosure -7: Details of grants received in last 3 years;
Enclosure 8: Summary of Audited financial reports of last 3 years)

- 17 Have you developed a Quality Manual meeting the requirements TQAS of the Scheme as mentioned in Appendix 2) Yes/ No
(Attach Training Quality Assurance System (TQAS), Institution Brochure and Associated Documents as Enclosure- 9 A, 9 B respectively.)

18 Declaration

I hereby declare the above information is true and correct as per my knowledge.

Authorised Signatory

Name: _____

Date:

Designation: _____

Place:

19. Please find enclosed the Demand Draft/ Cheque (Delhi only) no..... for RS..... dated drawn on.....in **favour of Quality Council of India**, payable at New Delhi towards the application fees (**Enclosure 10**)

List of Enclosures (to check)**Enclosed**

- | | |
|---|-------|
| 1. Registration Certificate of Trust/ Society | Y/ N |
| 2. Copy of Affiliation Certificate | Y/ N |
| 3. Organization chart | Y/ N |
| 4. Course Curriculum developed for each module | Y/N |
| 5. List and resumes of Teaching Staff (indicating qualification &Experience) | Y/ N |
| 6. Admin. Support Staff (indicating qualification and Experience) | Y / N |
| 7. Details of Grants received in last 3 years, if any | Y/ N |
| 8. Summary of Audited Financial Reports of last 3 years | Y/ N |
| 9. Training Quality Assurance System, Institution Brochure and Associated Documents | Y/ N |
| 10. Application Fee (as applicable) | Y/N |
| 11. Required Infrastructure Details | Y/N |

ANNEXURE 2: DECLARATION OF ACCEPTING NABET'S CODE OF CONDUCT

DECLARATION OF ACCEPTING NABET'S CODE OF CONDUCT

by

Registrar/C.E.O./ Head of Applicant/ Accredited Institution

This is to confirm that I, working as Registrar/ CEO/ Head ofagree with the Code of Conduct (Section 10 of Scheme), conditions of accreditation of NABET and give an undertaking that I would abide by the stated conditions for all activities pertaining to Training Activity.

I also understand that awarding/ continuation of accreditation of my organization is subject to continual compliance to conditions of accreditation.

Name
Designation
Date
Signature

To submit your application or for further details contact:

Chief Executive Officer
National Accreditation Board for Education and Training
Quality Council of India

Institute of Town Planners India
6th Floor, 4 - A, Ring Road, I P Estate,
New Delhi – 110002

Tel: +91 11 233 23 416 / 417 / 418 / 419 / 420 Fax: +91 11 233 23 415

Email: nabet@qcin.org, hari@qcin.org,

ANNEXURE 3: FACULTY RESUME FORMAT

Resume Format

(For Faculty)

Affix
Passport
Size

Mr./Ms./Mrs.

(First Name) (Middle Name) (Last Name)

1. Status in the Organization: In-house Full Time Employee Visiting Faculty

Applied for ISO/IEC17025 training ISO 15189

For suggested session(s)

2. Date of Birth _____

3. Home Address

_____ Pin Code _____

4. Tel. No. _____ 5. Fax No. _____

6. Email address _____

7. Office address _____

_____ Pin Code _____

8. Tel. No. _____ 9. Fax No. _____

10. Email address _____

11. Mailing address

Home Office

12. General Education (Senior Secondary)

Period (Year)	Board	Qualification	Educational Institution & Address	Subjects	Grade

13. Technical Education (Graduation & above):

Period (Year)	Institution Name & Address	Qualification	Subjects	Grade / % Marks

14. Registered / recognized training courses attended:

S.No.	Title of the Course	Conducted / Organized by (Name & Address)	Dates		Result
			From	To	

15. Membership of Professional Bodies:

S.No.	Professional Body (Name & Address)	Membership		Valid Till
		Grade	No.	

16. Experience (Please write in chronological order with present experience listed first):

A. General:

Period (Month and Year)	Organization with address	Department	Designation	*Role/Duties/ Responsibilities

B. Specific experience related to ISO/IEC 17025/15189 applied for:

S. No	Name of the Employer/Institute	Complete Name of the Project/ Training	Whether related to standard 17025/15189 Y/N	Roles and Responsibilities (Nature of Experience)	Period & Year

C. NABL Assessment Conducted

S. No.	Name & Location of the Lab	NABL Assessment Dates		Role: As a Lead Assessor/Technical Assessor
		From (dd/mm/yy)	To (dd/mm/yy)	

17. Declaration by the applicant

I attest that the above information relating to my education and experience is correct. I do understand that any incorrect information will result in the disqualification of self and the organizational accreditation with NABET.

Signature _____ Date ____/____/____

18. Declaration by the Institute

The above information in relation to Dr./Mr./Ms. has been verified and found to be correct.

I understand in case the information is found to be incorrect it may result in the rejection/ suspension of this application for the accreditation of LMS Training Institution.

Attested By _____
 Authorized Signatory: _____
 Name _____
 Designation _____

ANNEXURE 4: VISITING FACULTY MOU/AGREEMENT

MOU/AGREEMENT WITH VISITING FACULTY

Written MOU/Agreement shall be signed between the institution and visiting/empanelled faculty whose services are used for conducting training modules. Such MOU/Agreement should include:

- i. Name of the faculty & institution
- ii. Name of selected modules(17025/15189), disciplines, lecture
- iii. Scope of services covered
- iv. Duration of association
- v. Specific roles & responsibilities and acceptance of visiting faculty
- vi. Not empanelled with more than two institutions

ANNEXURE 5: TRAINEES FEEDBACK FORM

FEEDBACK FROM TRAINEES

a. General

Name of Trainee and Name of organisation	
Qualification	
Training attended	
Dates of Training	
Name of Accredited Training Provider	
Venue of Training (Address)	

b. Feedback

S. No.	Aspect	P/Avg./G (Poor/Average/Good)	Remarks with Example
1	Availability of adequate infrastructure in terms of:		
	a. Adequate seating capacity		
	b. Study environment		
	c. Course & Study Material		
	d. Facilities (Projector/ Internet/ Lab/ Flip charts etc.)		
	e. Food, Hygiene & other arrangements		
2	Whether training covered all aspects of Training Module prescribed by standard		
3	Whether the Training was focused on relevant subject		
4	Whether case study exercises conducted were relevant & useful		
5	Whether specific queries of participants during the training course/case study exercises/on other issues were addressed		
6	Whether the Test paper used for evaluation of trainees was relevant & did justice to the programme		

c. Rating to Training Programme in a scale of 5 (1-Poor, 5-Excellent) for

- Facilities, course material
- Quality, relevance & usefulness of training imparted
- Arrangements

d. Conclusion

Positive points of Training and learning (3 points)	Negative points of Training, if any, and improvements suggested (3 points)

Signature of Trainee with Date

For further details contact:

Chief Executive Officer

National Accreditation Board for Education and Training (NABET)

Quality Council of India

Institute of Town Planners India

6th Floor, 4 - A, Ring Road, I P Estate,

New Delhi – 110002

Tel: +91 11 233 23 416 / 417 / 418 / 419 / 420 Fax: +91 11 233 23 415

Email: nabet@qcin.org, hari@qcin.org,