Stakeholder Conclave of AERSSC

Dated: March 09, 2024

Timing: 3:00 PM to 5:00 PM

Mode: Virtual

Agenda: Attached as Annexure ‘A’

Stakeholders:
− AERSSC CEO
− AERSSC Secretariat
− Accreditation Board Members
− Accreditation Committee Member – Testing
− Accreditation Committee Members – Medical
− Assessors
− Laboratory’s Representatives
− Consultant, QCI

The purpose of the conclave is to make our roadmap understandable to all the stakeholders and to commit towards the International recognition and growth of AERSSC.

Background:

Against one of the comments of the APAC evaluation team, AERSSC has undertaken a comprehensive review of its procedures to upgrade its APAC/ILAC MRA. The review is being done by an expert from the Quality Council of India. This activity is partially supported by the Joint Development Support Committee of ILAC.

The AERSSC with the help of the expert is in the process of reviewing its existing system including documentation, processes systems, and records in conformance with ISO/IEC 17011:2017 and relevant APAC/ILAC requirements.
A first draft of the document is already prepared and by the end of this month, all the documents shall be ready for use. While reviewing the documents, the committee compositions have been changed, a few roles and responsibilities have also been reshuffled.

The purpose of the conclave was to appraise the progress of AERSSC including some key points in the documentation and to take the opinions of all the stakeholders.

Minutes:

1. CEO, AERSSC welcomed all the dignitaries/participants and briefed the agenda and purpose of the Conclave. He then shared the progress report and action plan with all the participants. He showed his commitment to getting the APAC MRA for AERSSC as soon as possible. All the members present appreciated the plan and agreed to the support.

2. The expert from QCI briefed about the Review of AERSSC documents; the amendments done in the various documents were explained to all the members by showing the key documents e.g. AERSSC 38 ‘Master List of Documents’, AERSSC 39 ‘Master List of Documents’, AERSSC 32 ‘General Information Broucher’. AERSSC 01 ‘Quality Manual’, etc.

The need, constitution, expansion, and role of various committees, Advisory Board Committee, Accreditation Committee, and Advisory Committee was also explained in-depth.

He thereafter emphasized the need to showcase the AERSSC presence in Nepal, its progress plan and the potential through strengthening its website and activating the Social Media Handle.

His thrust was on having a system of AERSSC in such a way as it can create an eco-system on Conformity Assessment Structure in the region. The system should be self-driven with the utmost trust of stakeholder in it, specifically in its impartiality, competence, and value addition.

3. The Accreditation Committee Chairman and members address the following points
   - Accreditation Committee members need to meet more often;
   - Review of documents is an improvement of AERSSC;
   - The constitution of the Board as well as the Committee is needed urgently as per the new document;
   - AERSSC should maintain a sustainable mechanism.
   - AERSSC’s Social Media is also an urgent need of the hour.

4. The Key remarks from the Team Leader include:
• System should be functional;
• Personal bias should be taken seriously while promoting the use of local assessors;
• Specific criteria/guidance documents should be there; As they give a direction to the laboratory in developing their system,
• There must be a comprehensive Checklist, to be used by the assessment team during the on-site assessment.
• AERSSC may also bring some schemes like ‘entry-level certification’ for the small laboratories to understand the system.

5. Accredited Laboratories representatives gave their opinion on:
• Promotion of locally trained personnel while avoiding conflict of interest;
• The website should be updated and should have more information.
• Validity of the certificates issued by non-AB’s in the country is to be taken up by AERSSC and an awareness must be created amongst the stakeholders/public.
• Consideration of Grading of laboratories as per the National Public Health Laboratory (NPHL) Guidelines for the establishment of the Health Laboratories in Nepal.

6. The Conclave concluded with thanks-giving remarks by the CEO of AERSSC and by showing his following commitment:
• All documents shall be reviewed as per ISO/IEC 17011 and APAC/ILAC requirements and the application shall be submitted in a month.
• All points raised during Conclave related to documents will be taken care;
• Organization of the Second conclave after the submission of the MRA Application;
• Records will be kept as mentioned in the master list of Records;
• Social media presence will be taken care of by AERSSC with the help of one of the Accreditation Committee Members.

The meeting ended with a very positive remark
## PROGRAMME

### Session 1: Inaugural

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<th>Topic</th>
<th>Presenter</th>
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<td>1500 – 1520</td>
<td>Welcome Purpose &amp; Objective of the Conclave</td>
<td>Dr. Joshi, CEO AERSSC</td>
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<tr>
<td>1520 – 1530</td>
<td>Special Address &amp; Future Plan</td>
<td>Chairman, AERSSC</td>
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### Session 2: AERSSC System

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<td>1530 – 1600</td>
<td>AERSSC Management System – Key Changes</td>
<td>Alok Jain, Director QCI</td>
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### Session 3: Stakeholder’s Perspective

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<td>Expectations from Medical Laboratories and Assessors</td>
<td>Chair, Accreditation Committee- Medical</td>
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<td>1610 – 1620</td>
<td>Expectations from Testing Laboratories and Assessors</td>
<td>Chair, Accreditation Committee- Testing</td>
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<td>1620 – 1630</td>
<td>Role of Advisory Committee</td>
<td>Chair, Advisory Committee</td>
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<td>1630 – 1645</td>
<td>Laboratory’s Voice (Q&amp;A)</td>
<td>Stakeholder – Laboratory</td>
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<td>1645 – 1700</td>
<td>Assessor’s Voice (Q&amp;A)</td>
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### Session 4: Closing

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<td>Q&amp;A</td>
<td>Dr. Joshi, CEO AERSSC</td>
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<td>1710 – 1715</td>
<td>Valedictory Remarks</td>
<td>Dr. Joshi, CEO AERSSC</td>
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