Region 4 **U.S. Environmental Protection Agency** **Laboratory Services & Applied Science Division** **Athens, Georgia**	
Operating Procedure	
Title: Management Review	ID: LSASDPROC-1007-R1
Issuing Authority: Deputy Director, LSASD	
Effective Date: February 28, 2020	Review Due Date: February 28,2024

Purpose

This Operating Procedure is specific to the Region 4 Laboratory Services & Applied Science Division (LSASD) to maintain conformance to technical and quality system requirements. This procedure describes the annual LSASD Management Review of the quality system and environmental testing activities.

Scope/Application

The LSASD Quality Management System (QMS) shall be internally reviewed, at least, annually to evaluate its continued suitability and effectiveness and to consider any necessary changes or improvements. Annual Management Review is a requirement of the ISO/IEC 17025:2017 Accreditation Standard and will be conducted as detailed in this SOP. The requirements of this procedure apply to all personnel who perform work under the LSASD QMS. While this SOP may be informative, it is not intended for and may not be directly applicable to operations in other organizations. Mention of trade names or commercial products in this operating procedure does not constitute endorsement or recommendation for use.

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1.0 Procedure

During the first quarter of each calendar year, the Division Quality Assurance Coordinator (QAC) Chief or designee will meet with the Division Director, Deputy Division Director, Regional Quality Assurance Manager (RQAM), and Division Management to assess the LSASD Quality System and evaluate its continuing suitability and effectiveness. Additional staff, as requested, may also be in attendance. Any new changes or improvements to the quality system will be introduced during this review. An agenda detailing the following discussion points will be provided to all attendees:

- Other relevant factors, such as quality control activities, resources and staff training
- Suitability of Policy and Procedures
- Changes to Volume and/or Type of Work
- Annual Audit Plan and Recent Internal Audit
- Corrective Actions, Preventative Actions and Quality Improvements
- External Audits
- Staff Training
- Proficiency Tests
- Customer Feedback
- Complaints
- Other relevant factors such as quality control activities and resources
- Recommendations for Improvement/Additional; Discussion Items

Any findings of nonconformance within the quality system that result from the Management Review will be handled as a corrective action according to the LSASD Procedure for Corrective Actions, Preventive Actions and Quality Improvements (LSASD PROC-1005). Management will review and/or act on proposed actions or improvements. Any corrective actions that results from the Management Review will be assigned an appropriate timeframe for completion as part of the Management Review meeting. The QAC will coordinate the tracking of these actions.

The Management Review agenda and any findings resulting from the Management Review will be recorded in the minutes of the meeting, which will be filed with records of assessments of the quality system. Records associated with corrective, preventive actions, or quality improvements will also be maintained by the QAC, as applicable.

2.0 Definitions

Quality System: A system of quality assurance practices and operational procedures.

ISO/IEC 17025:2017: International standard that specifies the general requirements for the competency to carry out tests and/or calibrations.

Internal Audits: An audit of a particular are with LSASD.

Formal Corrective Action (FCA): A corrective action used to correct systematic issues. FCAs include a multi-step process of describing the issue, performing a root cause analysis leading to a proposed corrective action plan, acceptance and closure.

Preventive Action (PA): A proactive process to identify opportunities for improvement or potential risks. PAs are identified as systematic and will be taken through the same multi-step process as formal corrective action, a root cause analysis may not be required for preventive actions.

3.0 References

ISO/IEC 17025: 2017, Third edition 11/2017

Laboratory Operations and Quality Assurance Manual, current version.

LSASD Operating Procedure for Internal Audits (LSASD PROC-1004), current version

LSASD Operating Procedure for Corrective Actions, Preventive Action and Quality Improvements (LSASD PROC-1005), current version

4.0 Revision History

This table shows changes to this controlled document over time. The most recent version is presented in the top row of the table. Previous versions of the document are maintained by the LSASD QAC.

History	Effective Date
SESDPROC-1007-R0, Management Review	October 1, 2017
LSASDPROC-1007-R1, Management Review, replaces SESDPROC-1007-R0 Updated the document name to reflect the Division name post re-alignment. Replaced LQM and FQM with QAC throughout. Included the RQAM and Division Management as attendees to the Management Review meeting in Section1. Updated the review topics to be reflective of the requirements of ISO 17025:2017 standard. Updated ISO standard reference to the 2017 standard.	February 28, 2020