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ANNEX H:

PERFORMANCE INDICATORS FOR 2025/2026

SN	Performance Indicators	Targets
1.	Number of assessments to be carried out (Laboratories & Certification Bodies)	56
2.	Number of new accreditations granted (Laboratories & Certification Bodies)	4
3.	To ensure that assessments are being carried out within the scheduled timelines of 1 month before or after the scheduled dates (Laboratories & Certification Bodies)	Within 1 month of scheduled dates
4.	To ensure that Accreditation Reports are being prepared within 1.5 month from clearance of all nonconformities (Laboratories & Certification Bodies)	Within 1.5 months from clearance of all nonconformities raised
5.	To ensure that Accreditation Reports are submitted to the Accreditation Committee for decision-making within 1 month from signature of reports (Director)	Within 1 month from signature of reports by Assessment Team
6.	To ensure internal audits are carried out as scheduled in Internal Audit Plan within 15 days from the scheduled month (Quality Section)	Within 15 days from scheduled month
7.	To ensure that corrective actions and opportunities for improvement are completed in a timely manner i.e. within 3 months from the date the nonconformities or improvement requests have been raised (Quality Section)	Within 3 months from the date of the nonconformity or improvement request
8.	To ensure that implemented corrective actions are submitted within deadline (Laboratories)	As per agreed deadlines
9.	Number of CAB personnel trained (Training)	64

Appendix A: Amendment Table

SN	Section	Amendment
1.	Table	1. All performance indicators updated following staff meeting dated 01 July 2025 (NAS/ADM/8 V5 folio 402)