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ACC-CD-43

Criteria For the Accreditation of Forensics Testing Laboratories

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1 Background Information

1.1 Process Overview

This guidance document specifies the accreditation criteria for organisations undertaking forensic/ballistic laboratory testing and are seeking accreditation from KENAS. The content of this document will be reviewed and revised every four years or as needed.

The requirements for accreditation are laid down in ISO/IEC 17025 standard. These requirements apply to Forensics testing but in certain instances, additional guidance is necessary to take to account the technologies involved.

1.2 Purpose

This document has been prepared by a Technical Working Group for Forensic Testing Laboratory Accreditation and authorized for adoption by KENAS. It complements the ISO/IEC 17025 standard and provides specific guidance for use by KENAS assessors and laboratories seeking accreditation and are accredited for the forensics testing scope.

1.3 Scope

This document covers the application of ISO/IEC 17025 for the accreditation of forensic testing laboratories and will be applied in conjunction with those in the Assessor Guide and Terms of Reference ACC-CD-02, procedure for Management and Reporting of Assessments ACC-PR-07, Sampling during Assessment and Internal Audits ACC-PR-03, Policy for Management of Extraordinary Events PL-13, and the Policy for dealing with objection of assessors/experts PL-30. Accreditation shall be based on demonstrated competence of the forensic testing laboratory in accordance with the requirements of ISO/IEC 17025.

Forensic Science is the application of scientific methods and techniques to investigate crimes and analyse evidence that can be presented in a court of law. It combines knowledge from various fields such as biology, chemistry, physics, and computer science to help law enforcement uncover the truth in criminal or civil cases.

The Forensic Science disciplines shall include Forensic Biology (Human and Non-Human DNA, Microbial forensic); Forensic Chemistry (Toxicology, Narcotics); Forensic Physics (including ballistics); Forensic Engineering (AI forensics, cyber and digital forensics) and Forensic Medicine.

1.4 Role(s) and Responsibility

The roles and responsibilities outlined below relate to the implementation of this document in KENAS by the Testing Laboratories Accreditation Scheme.

Role	Responsibility
Manager Testing Laboratories	Process owner
Principal Accreditation Officer Testing Laboratories	Reviewer
Chief Manager Laboratories	Recommender
Chief Executive Officer	Approval
Forensic Testing Laboratories	Compliance

2 Terms and Definitions

For the purpose of this guidance document, the following terms and definitions shall apply in addition to those given in ISO/IEC 17000 and the Kenya Accreditation Service Act 2019.

2.1 Definition of Terms

2.1.1 Accreditation

Third-party attestation related to a conformity assessment body conveying formal demonstration of its competence to carry out specific conformity assessment tasks.

2.1.2 Accuracy

The closeness of agreement between a test result and the accepted reference value. The test result may be a mean of several values.

2.1.3 Competence

Ability to apply knowledge, experience, and skills to achieve intended results.

2.1.4 Court Statement

Is a formal declaration whether oral or written statement presenting facts, observation, testimony or other information. This could be in the form of an affidavit, or expert report.

2.1.5 Forensic report

A written report of the results and interpretations of forensic tests/examinations submitted to court. Such reports may be in a format prescribed in legislation.

2.1.6 False Negative

Failing to report a substance as being present in a sample, when in fact it was present and would ordinarily be reported if found.

2.1.7 False Positive

Reporting a substance detected which is not actually present in the sample analysed.

2.1.8 Known (Comparison) Sample

A traceable reference sample.

2.1.9 Laboratory Internal Chain of Custody

Documentation maintained within the laboratory to record the chronological traceability of custody (by Person(s) or upon storage) and actions performed on the sample and any aliquot of the sample taken for analytical testing.

2.1.10 Limit of detection

An estimate of the lowest concentration of analyte in a real sample matrix that can be detected using a specific test method, as compared with known matrix spikes and blanks carried through the complete method.

2.1.11 Objective Test

A test which having been documented and validated is under control so that it can be demonstrated that all appropriately trained staff will obtain the same results within defined limits. These defined limits relate to expressions of degrees of probability as well as numerical values.

2.1.12 Precision

The closeness of agreement between independent test results obtained under prescribed conditions.

2.1.13 Quantitative Analysis

The accurate measurement of the amount of a specific drug, metabolite, poison, alcohol or other volatile contained in a human biofluid, tissue or other sample.

2.1.14 Reference Collection

A collection of stable materials, substances, objects or artifacts of known properties or origin, that may be used in the determination of the properties or origins of unknown items.

2.1.15 Scope of accreditation

The specific conformity assessment services for which accreditation is sought or has been granted.

2.1.16 Specificity (or selectivity)

The capability of an analytical procedure to reliably discriminate among chemically or physically related substances.

2.1.17 Forensic Science

Forensic science is the application of scientific principles to criminal investigations and legal matters. It involves evidence from, crime scenes, post crime scenes and forensic analysis interest investigations to help solve cases and support legal proceedings.

Although these types of analyses are primarily conducted for public health purposes, they may also become relevant in criminal investigations and thus fall under forensic analysis. Examples include the analysis of food, water effluents, drugs, and environmental pollutant.

2.1.18 2.1.17 Forensics:

Forensics is the application of scientific methods and techniques to investigate crimes, analyze evidence, and assist in legal proceedings. It involves various disciplines, such as biology, chemistry, physics, and digital analysis, to uncover facts, identify suspects, and support law enforcement and the justice system.

2.1.19 Ballistics

Ballistics is the study of firearms, bullets, and projectiles, focusing on their movement, behaviour, and effects. It plays a crucial role in forensic science by helping investigators determine how a firearm was used in a crime. Forensic Ballistics identifies weapons, matches bullets to firearms, and examines gunshot residue (GSR) to link suspects to crime scenes.

2.2 Acronyms and Abbreviations

EQA	External Quality Assessment
KENAS	Kenya Accreditation Service
MU	Measure of Uncertainty
PT	Proficiency Testing
QC	Quality Control

3 Criteria

3.1 General Requirements

3.1.1 All KENAS assessments are done in accordance with ISO/IEC 17025 and the relevant KENAS policies and procedures. KENAS documents are available on the KENAS Website (www.kenas.go.ke).

3.1.2 The Testing Laboratory is responsible to define the scope of forensics testing and to have criteria for sample retention.

3.2 Structural Requirements

3.2.1 Structural requirements shall be implemented in accordance with the requirements of ISO/IEC 17025. The laboratory shall have available the personnel, facilities, equipment, systems and support services necessary to manage and perform its scope of laboratory activities.

3.2.2 The authority of the individual with direct operational control of the forensic science laboratory shall be defined and be commensurate with his/her responsibilities.

3.2.3 Where a laboratory operates multiple sites, procedures shall be in place to verify each site's continuing compliance with the management system.

3.2.4 Where the forensic science laboratory is part of a parent organisation, the laboratory shall designate personnel who is/are responsible for coordinating the maintenance of the management system. Where the organisation operates multiple sites, the responsibilities and roles of personnel responsible for managing the quality output of these sites shall be clearly defined.

3.2.5 The scope of responsibilities and authorities of personnel responsible for the management system shall be clearly defined, including delegations. These personnel shall ensure that these activities are undertaken in accordance with the procedures and within the timeframes specified by the management system and include, but not limited to, the following:

- maintenance of the management system documentation and associated operational procedures;
- monitoring of laboratory practices to verify continuing compliance with policies and procedures;
- evaluation of instrument calibration and maintenance records;
- periodic assessment of the adequacy of report review activities;
- ensuring the validation of new technical procedures;
- overseeing the investigation of technical problems, proposal of remedial actions and verification of their implementation;
- administration of proficiency testing and evaluation of results;

- selection, training and evaluation of internal auditors;
- scheduling and coordination of management system audits;
- maintenance of training records of laboratory personnel;
- training recommendations to improve the quality of laboratory staff;
- administration of court testimony monitoring, maintenance of records and provision of feedback on results;
- review of feedback received from customers.
- proposal of corrections and improvements to the management system.

3.3 Resource Requirements

3.3.1 Personnel

The Forensics laboratory shall have the following key personnel and minimum qualifications as listed:

3.3.1.1 Laboratory in charge

i. Academic qualification: Minimum of Degree in Forensic Science, Medical laboratory sciences, Chemistry, Biology, Biochemistry, Physics or a related field
ii. Knowledge of forensic laboratory techniques
iii. Experience with crime scene investigation techniques, evidence handling and chain of custody
iv. Awareness of legal and regulatory frameworks for forensic science

3.3.1.2 Personnel responsible for the Laboratory Quality Management System

i. Academic qualification: Minimum of Degree in Forensic Science, Chemistry, Biology, Biochemistry, Physics or a related field
ii. Knowledge of forensic science principles and laboratory techniques
iii. Formal training in ISO/IEC 17025 standard requirements
iv. Experience in quality assurance, accreditation and regulatory compliance
v. Awareness of legal and regulatory frameworks for forensic science

3.3.1.3 Heads of Forensics disciplines

i. Academic qualifications: minimum of Degree in Forensic Science, Chemistry, Biology, Biochemistry, Toxicology, or related field
ii. Experience: with advanced laboratory techniques and instrumentation.
iii. Knowledge in forensic methodologies
iv. In depth knowledge of the respective forensic discipline

3.3.1.4 Laboratory analysts/ Laboratory technician (Entry level as applicable)

i. Academic qualifications. Degree or Diploma in Forensic Science, Chemistry, Biology, Biochemistry, Toxicology, or related field

ii. Relevant training: Forensic laboratory techniques and protocols
iii. Proficiency in operating and maintaining laboratory instrumentation
iv. Knowledge of sample preparation, extraction and chemical testing procedures
v. Knowledge of evidence collection, preservation and documentation and chain of custody procedures.
vi. Qualifications for the laboratory analyst can include diploma and higher diploma in forensic science and all relevant courses.

3.3.1.5 Analysts/examiners shall have tertiary qualifications and/or demonstrated experience in the relevant discipline.

3.3.1.6 A training program for each discipline shall be available.

3.3.1.7 Where relevant, the training program shall include presentation of evidence in court. All analysts/examiners shall be able to articulate concepts and provide opinion testimony relevant to assigned tasks. All trainees shall receive relevant and comprehensive training before testifying as an expert witness in court. This may include moot court, actual court observation and appropriate reading materials.

3.3.1.8 Assessment of initial competency shall be undertaken for all new staff in all applicable areas before such staff are authorised to work independently, including:

i. Theoretical and practical competency test.
ii. Crime scene examinations.

3.3.1.9 Procedures for the conduct of staff evaluations should be available.

3.3.1.10 Staff records shall include as a minimum:

i. Induction for a period of six months
ii. Relevant academic qualification and certifications.
iii. Training courses undertaken.
iv. Evaluation of continued competence.
v. Conferences, seminars, workshops etc. attended.
vi. Authorisation to perform work independently.
vii. Background check and periodical assessment including but not limited to criminal records, psychological issues, drug tests.

3.3.1.11 Access to current relevant literature shall be available for each functional area. Evidence of formal staff qualifications and membership of professional societies may be requested as part of the assessment process.

3.3.1.12 The laboratory shall have a procedure determining the frequency of the review process for all individuals, including the need for retraining if necessary to maintain competency.

3.3.1.13 The laboratory shall establish a procedure for court testimony monitoring which shall address the following:

i. The frequency of court testimony monitoring.
ii. The individuals authorized to conduct the evaluation.
iii. Assessment criteria, including the analysts/examiner's objectivity, appearance, poise, performance under cross-examination as well as effectiveness of presentation (e.g. technical knowledge, ability to convey scientific concepts in understandable terms);
iv. Required remedial actions if the evaluation is unsatisfactory.
v. The importance of providing timely feedback to the analyst/examiner.

3.3.1.14 A laboratory shall choose to use a combination of methods to perform the monitoring. This may include:

i. review of transcripts.
ii. witness evaluation forms / testimony feedback forms.
iii. formal moot court attendance.
iv. Records of each evaluation including details of the criterion used for the testimony evaluation, date and persons who conducted the evaluation.

3.3.2 Facilities and environmental conditions

3.3.2.1 The design of the laboratory shall maximise laboratory functions and activities, safeguard physical evidence, protect the confidential nature of the laboratory's operation and provide a safe and healthy working environment.

3.3.2.2 Mortuaries used as storage in forensic science are critical to preserve and maintain integrity for the exhibit, prevent contamination, and maintain safety standards for staff and the public. Environmental conditions to be considered shall include but not limited to temperature control, ventilation and air quality, lighting specifications.

3.3.2.3 Due to the highly sensitive nature of and criticality of handling DNA data, the DNA testing the laboratory shall ensure that procedures and controls are implemented to minimise cross-contamination and that cross-contamination events can be detected and investigated. A minimum of three separate, dedicated rooms are required for the:

i. Examination of items.
ii. Extraction of DNA.
iii. Amplification of DNA.

3.3.2.4 The PCR set-up area shall be separate from the DNA amplification room to prevent contamination. However, for robotic platforms, this separation may not be required if contamination events can be reliably detected. . All equipment and reagents used in the PCR set-up area and DNA amplification room shall be designated for their specific locations and shall not be used in other areas.

3.3.2.5 Procedures for cleaning and decontaminating facilities and equipment to eliminate DNA and PCR product contamination. If a laboratory is used for DNA sampling, an environmental swabbing protocol shall be implemented to monitor the effectiveness of cleaning procedures. In addition to general contamination control measures, the risk of contamination specific to Massively Parallel Sequencing (MPS) wet laboratory procedures shall be identified and mitigated.

3.3.2.6 Security and access policies and procedures on laboratory security shall be documented. This shall include the access allowed by customers or their representatives to the laboratory, exhibits and laboratory records. Examples may include access to relevant areas of the laboratory to witness tests/examinations, access either on-site or off-site to case records and provision of exhibits or samples for independent tests/examinations.

3.3.2.7 The laboratory shall have arrangements in place to detect unauthorised access, (all exterior entrance/exit points to the laboratory shall be controlled in order to prevent access by unauthorised personnel and all security doors shall have keys or other access devices limited to authorised personnel). The entire exterior perimeter of a laboratory shall inhibit unauthorised access.

3.3.2.8 The laboratory shall be monitored during vacant hours. The action to be taken in the event that an unauthorised access to the laboratory is suspected shall be documented.

3.3.2.9 Where a laboratory exists within a host agency laboratory, documented procedures shall be required to permit out-of-hours entry for emergencies. Such arrangements are acceptable if they include, for example, the breaking of a storage seal to access a key or code and/or notifying an authorised staff member

3.3.2.10 There shall be documented procedures for the authorisation of such persons and a record shall be maintained of their time spent in the laboratory. In general, it is expected that such persons will meet appropriate security standards as required by the laboratory and will be made aware of relevant procedures/requirements and of the limitations of their access.

1.1.1 Equipment

3.3.2.11 All critical reagents shall be routinely checked for their reliability. Standards and reagents shall be labelled with sufficient information to allow traceability back to its original preparation.

3.3.2.12 All reference materials, including certified reference materials and reference collections shall be uniquely identified and records of their use and maintenance properly documented. DNA reference materials and population databases shall undergo statistical analysis to check for genetic dependence. Any significant deviations from expected patterns shall be evaluated and adequately addressed before reporting results. Databases used for comparison shall be representative of the relevant population to ensure accuracy and reliability.

3.4 Process Requirements

3.4.1 Selection and verification of methods

3.4.1.1 Test/examination methods and procedures used shall be accepted in the field or supported by data gathered and recorded in a scientific manner. Procedures adopted shall be demonstrably capable of generating valid results.

3.4.1.2 Where a laboratory introduces a validated method, it shall first demonstrate the reliability of the procedure in-house (i.e. verify) against any documented performance characteristics of that procedure. As a minimum, the method shall be tested using known samples (e.g. proficiency test samples, samples from an external agency).

3.4.1.3 Records of method verification shall be maintained for future reference. If destructive tests are necessary, procedures shall ensure that as much material as possible is retained for reanalysis.

3.4.1.4 Methods, procedures and supporting documentation shall include, where appropriate:

i. description of the sample/item to be tested/examined;
ii. parameters or quantities to be determined;
iii. equipment/instrumentation required;
iv. descriptions of sample preparation methods, controls, standards and calibration procedures; a discussion of precautions, possible sources of error or limitations of the procedure;
v. criteria for the rejection of suspect results;
vi. data/observations to be recorded and method(s) of analysis; literature; and references.

3.4.2 Validation of methods

3.4.2.1 Methods may be validated by comparison with other established methods using certified reference materials (where available) or materials of known characteristics. The General Accreditation Guidance: Validation and verification of quantitative and qualitative test methods provides guidance on procedures for validation and verification of analytical test methods.

3.4.2.2 Validation studies can be conducted by the scientific community (as in the case of standard or published methods) or by the forensic science laboratory itself (as in the case of methods developed in-house or where significant modifications are made to previously validated methods).

3.4.2.3 Where fully automated processes for DNA analysis are used, it shall be ensured that the systems have been fully validated for the intended purpose (either by the manufacturer or in-house).

3.4.3 Sampling

3.4.3.1 Procedures for sampling shall ensure that evidence/sample integrity is maintained. Facilities undertaking parentage testing shall make agencies collecting specimens aware in writing of their obligations and the associated Regulations.

3.4.4 Handling of test and calibration items

3.4.4.1 Procedures for the receipt of evidence shall ensure that wherever possible, items stored in the laboratory are properly sealed. When processing or analysing electronically recorded evidence items, procedures shall be in place to minimise the risk of permanent alteration to the original recording. Where possible, processing or analysis shall be conducted on a working copy.

3.4.4.2 Test fire ammunition is considered to be an artefact of the firearms examination process and may be treated as a laboratory-generated examination record rather than evidence.

3.4.4.3 Each individual item of evidence shall be marked with unique identification. Should the item not lend itself to marking, its proximal container shall be marked. The identifier shall unambiguously identify the case. Labelling on caps/lids alone is not acceptable because of the risk of wrongly replacing lids during testing of batches of like samples.

3.4.4.4 Where the integrity of the evidence is potentially compromised (e.g. poorly sealed) this shall be documented in the final report.

3.4.4.5 The facilities procedures for maintaining the integrity of evidence or samples under its control shall cover contamination issues and tamper proofing. All evidence or samples shall be sealed and identify the person sealing the evidence. The use of uniquely numbered seals is acceptable, provided readily available supporting records detail the person sealing the evidence. If tape is used to seal containers, it shall be initialled or otherwise identified. Heat-sealed packages shall have initials or other identification across the seal.

3.4.4.6 Chain of custody records shall include the name and signature of each individual handling the evidence, date and time of transfer, description of the evidence, reason for transfer, condition of the evidence, and the receiving party's details. The laboratory shall maintain records providing a comprehensive history of each evidence transfer over which the laboratory has control.

3.4.4.7 The laboratory shall have procedures for handling, storage, and transfer of evidence under the chain of custody throughout the testing process, which shall be aligned to Clause 7.4 of ISO/IEC 17025 standard. The procedures shall ensure that storage is maintained in access-controlled locations, with designated responsible persons. Access shall be documented, specifying who has access and under what conditions, ensuring accountability and traceability.

3.4.4.8 Electronic evidence shall maintain security features that log access, storage, change or transfer of data and any other requirements to ensure authenticity and traceability of electronic evidence such as digital signatures, biometric verification, encrypted logs, write-blockers, hashing, digital signatures (e.g., ISO 27037).

3.4.4.9 Evidence to be stored and transported in vehicles shall be appropriately packaged. Alternative arrangements shall be made for items of evidence collected from crime scenes that cannot be packaged in such a way that loss or contamination would be evident.

3.4.4.10 Evidence to be stored and transported in vehicles shall be appropriately packaged. Alternative arrangements shall be made for items of evidence collected from crime scenes that cannot be packaged in such a way that loss or contamination would be evident.

3.4.5 Technical Records:

The records system shall include all data and observations and any other analytical/examination or administrative records which support conclusions.

3.4.5.1 In general, the records required to support conclusions shall be such that in the absence of the analyst/examiner, another competent analyst/examiner or supervisor can evaluate what was done and interpret the data. Unique identification (lot/batch number or preparation date) of standards and critical reagents shall be recorded. Where instrumental analyses are conducted, operating parameters shall be traceable including those not specified in the method.

3.4.5.2 Instrument charts and graphs on analyses that are batched (e.g. blood alcohol determinations, drug screening) may be more appropriately kept in a central location as specified in the laboratory's procedure manuals.

3.4.5.3 Documented procedures shall include a description of the storage of records, such as chromatograms, not stored in the case record. Where appropriate, observations or test results shall be preserved by photography or electronic scanning (e.g. electrophoretic runs, physical matches, quantitation results). Photocopies may also be suitable (e.g. thin-layer chromatography results, questioned documents).

3.4.5.4 When a test result or observation is rejected, the reason(s) shall be recorded (e.g. instrument or standard failure, a result off scale or outside acceptance criteria for the method).

3.4.5.5 The laboratory shall maintain a case record in a designated location(s) under a unique case designator.

3.4.5.6 The laboratory shall have a system to uniquely identify or link all records in or pertaining to the case record. The total number of pages in the case record shall also be clearly identified.

3.4.6 Evaluation of measurement uncertainty

3.4.6.1 Evaluation of measurement uncertainty is required for all quantitative tests. This also applies where a qualitative result is issued based on a numerical value. For qualitative analysis, facilities are encouraged to have an understanding of the variability of all their results where this is possible.

3.4.7 Assuring the validity of results

3.4.7.1 The range of quality control activities available to facilities includes the use of:

i. Reference collections;
ii. Certified reference materials;
iii. Electronic reference sets;
iv. Internally generated reference materials/collections;
v. Independent checks by other analysts/examiners;
vi. Positive and negative controls;

vii. Replicate testing/examination;
viii. Alternative methods;
ix. Spiked samples, standard additions and internal standards.

3.4.7.2 The laboratory's quality control procedures shall include the following where relevant:

i. an extraction negative sample with each set of extractions and shall be typed at every locus being tested. The laboratory shall have a policy for the reporting of re-tested samples where the extraction negative has been exhausted due to previous typing;
ii. An amplification blank with each sample set;
iii. A human DNA sample of known type introduced at or before the amplification step as a positive control and carried through the remainder of the typing.

3.4.7.3 DNA profiling data shall be independently typed or analysed by two authorised scientists, who shall then reach a consensus on the final DNA typing results before reporting.

3.4.7.4 Alternatively, a validated expert system may be used in combination with one authorised scientist to verify and confirm the results.

3.4.7.5 A procedure shall be available for the ongoing technical and administrative review of case records. 100% of case files shall be both technically and administratively reviewed unless risk assessments have been completed for reducing this percentage. Evidence of the risk assessment shall be available upon request. It is acceptable for administrative and technical reviews to be performed as part of one review process.

3.4.7.6 The procedure shall include:

i. The person conducting each type of review.
ii. The criteria to be used for each type of review.
iii. The number/percentage of case records to be reviewed where this is not 100%.
iv. Details that the reported conclusions fall within the range of acceptable opinions of knowledgeable individuals in the field of forensic science or are supported by sufficient scientific data.
v. The course(s) of action should a discrepancy be found.

3.4.7.7 Records of reviews conducted shall be kept and include the identity of the reviewer and the date of the review. Use of initials or signature is satisfactory provided the reviewer can be clearly identified.

3.4.7.8 Any significant difference in the interpretation or opinions shall be recorded.

3.4.7.9 While a technical review is a crucial part of the laboratory's quality assurance program, it shall not be conducted in a way that transfers perceived responsibility for the scientific findings from the examiner to the reviewer. The examiner remains accountable for the findings and is responsible for providing sworn testimony regarding the findings.

3.4.7.10 The sample shall be subjected to an independent examination to ensure quality assurance. The one collecting the sample is not to be involved in its the examination to avoid bias and to uphold impartiality in handling the forensic science case.

3.4.7.11 KENAS requires each applicant or accredited laboratory to participate in appropriate proficiency testing (PT), where available. Where proficiency testing meets the needs of the laboratory, participation is mandatory and at least one test per skill set shall be undertaken annually, where available. A laboratory shall complete all proficiency tests for which it is enrolled.

3.4.7.12 PT samples/items shall be handled in the same way as routine casework as far as practicable. The laboratory's routine test procedures shall be used. Additionally, the following requirements apply:

i. performance in PT programs shall be reviewed.
ii. feedback shall be provided to all relevant staff; and
iii. where necessary, corrective action shall be taken.

3.4.7.13 PT samples are expected to be representative of items examined in normal forensic case work. A PT sample may be apportioned among a number of examiners if doing so does not alter the character of the testing.

3.4.7.14 In addition to participating in external PT, or where external PT is unavailable, a laboratory shall consider conducting inter-laboratory or intra-laboratory comparisons. This could include blind tests prepared internally (or externally) and circulated, or re-examination of a completed case by a different examiner.

3.4.7.15 To obtain the optimum benefit from PT, the laboratory shall emphasise the educational aspects of the program and avoid a punitive approach when taking any corrective actions.

3.4.7.16 A laboratory's performance in PT will be assessed on-site, during assessments and surveillance visits. Evidence of review of the returned results and any corrective action taken in response to outliers is also required to be available and will be reviewed by the KENAS assessment team.

3.5 Reporting of Results

The requirements on reporting of results shall be as in ISO/IEC 17025.

3.6 Use of KENAS accreditation symbol on examination reports

The rules for the use of the KENAS symbol are set in the document PL-54 Policy on the Use of KENAS Marks, Combined Marks and Reference.

4 Associated Documents

Ref	Document Identifier	Document Title
1.	ISO/IEC 17025	Testing and calibration laboratories
2.	ISO 21043-2	Forensic Sciences - Part 2: Recognition, recording, collecting, transport and storage of items
3.	ISO 9001	Quality Management Systems Requirements
4.	ILAC G19/06	Modules in a Forensic Science Process
5.	ISO 27037	Information Technology- Security techniques: Guidelines for identification, collection, acquisition and preservation of digital evidence
6.	ISO 14644-1	Cleanrooms and associated controlled environments Part 1: Classification of air cleanliness by particle concentration

6 Revision/Amendment Records

Date	Ver	Revised By	Reason For Revision
28/06/2025	01	SDE	Newly developed