APPENDIX AA
ADOPTION PROPOSAL FORM

**CPR183/F12**

**KENYA BUREAU OF STANDARDS**

|  |  |
| --- | --- |
| **Document Type:** | **Adoption proposal** |
| **Dates:** | Circulation date | Closing date |
| **12/07/2024** | **11/08/2024** |
| **TC Secretary** | **This form shall be filled, signed and returned to Kenya Bureau of Standards for the attention of Jane Wainaina (**jwainaina@kebs.org)  |

The Kenya Bureau of Standards intends to adopt the International Standards as detailed here below

Number **ISO 16021:2024**

Title: **Absorbent incontinence products for urine and/or faeces — Basic principles for evaluation of single-use adult products from the perspective of users and caregivers**

Scope: **This International Standard provides guidelines for designing and conducting a user evaluation of single-use adultincontinence-absorbing aids. It provides guidance on creating data collection tools. In particular, it provides a**

**framework for eliciting and recording the views of users and their carers on product performance. In addition, an**

**optional approach for establishing the leakage performance and wear times of products and the mass of urine in**

**them is described.**

We are therefore seeking views from potential users in respect of the same. The Standard is available at the Kenya Bureau of Standards Information Centre. Please tick and fill your preference of the listed option. (If the spaces provided are not enough, please attach a separate sheet of paper).

 Adoption acceptable as presented

 ...............................................................................................................................

 ...............................................................................................................................

 Adoption proposal not acceptable because of the reason(s) below

 ...............................................................................................................................

 ...............................................................................................................................

 Our Recommendations are as follows

 ...............................................................................................................................

 ...............................................................................................................................

Name and Signature (of respondent): ................................................

Position (of respondent): .....................................

On behalf of ......................................................................................... (Name of organization)

Date .........................................................................

**NOTE:** Absence of any reply or comments shall be deemed to be an acceptance of the proposal for adoption and **shall constitute an approval vote**.