INTERNAL AUDITS

1 Purpose

To specify a procedure for planning and carrying out internal audits of the quality management system in the testing laboratory.

2 Scope

Internal audits shall address all activities of the testing laboratory.

3 Responsibilities

Technical Manager of the testing laboratory

- To authorize the audit plan
- To provide the resources (staff, financing, time) for the audit
- To obtain written assurance that an external auditor will respect the confidentiality attached to the audit.

Quality Manager

- To plan the audit at the prescribed intervals.
- To select and appoint the auditor(s).
- To ascertain that the audit has been successfully completed.
- To collect the individual audit reports.
- To check the completion of corrective actions on audit findings.

	Function	Name	Signature and Date
Authorized	Technical Manager	R. Czarwinski	Czarwinski 23.11.11
Approved	Deputy Technical Manager	J. Ma	23.11.11
Approved	Individual Monitoring Service Group Leader	R. Cruz-Suarez	24.11.11
Approved	Operational Service Group Leader	L. Sagi	Sáj Laci 23.11.11.
Registered	Quality Manager	T. Benesch	2011-11-24

Auditor

- To be informed about the scope of the audit.
- To read and check the relevant quality documentation.
- To prepare an audit report.

Audited Party (Auditee)

- To submit the relevant quality documentation.
- To provide adequate facilities for conducting the audit.
- To have staff available to support the audit.
- To facilitate access to any workplace needed for the audit (with all necessary precautions taken).

4 Additional Information

None.

5 Description

The procedure is depicted in the flowchart on the next page.

The internal audit is the only instrument of control in a quality management system based on knowledge, training, experience, planning and motivation. It shall be used regularly once a year, or on special occasions, triggered by, inter alia, management needs, customer complaints and corrective actions, to verify the compliance of activities with the documented quality management system. The internal audit shall be planned by the Quality Manager and carried out by trained auditors.

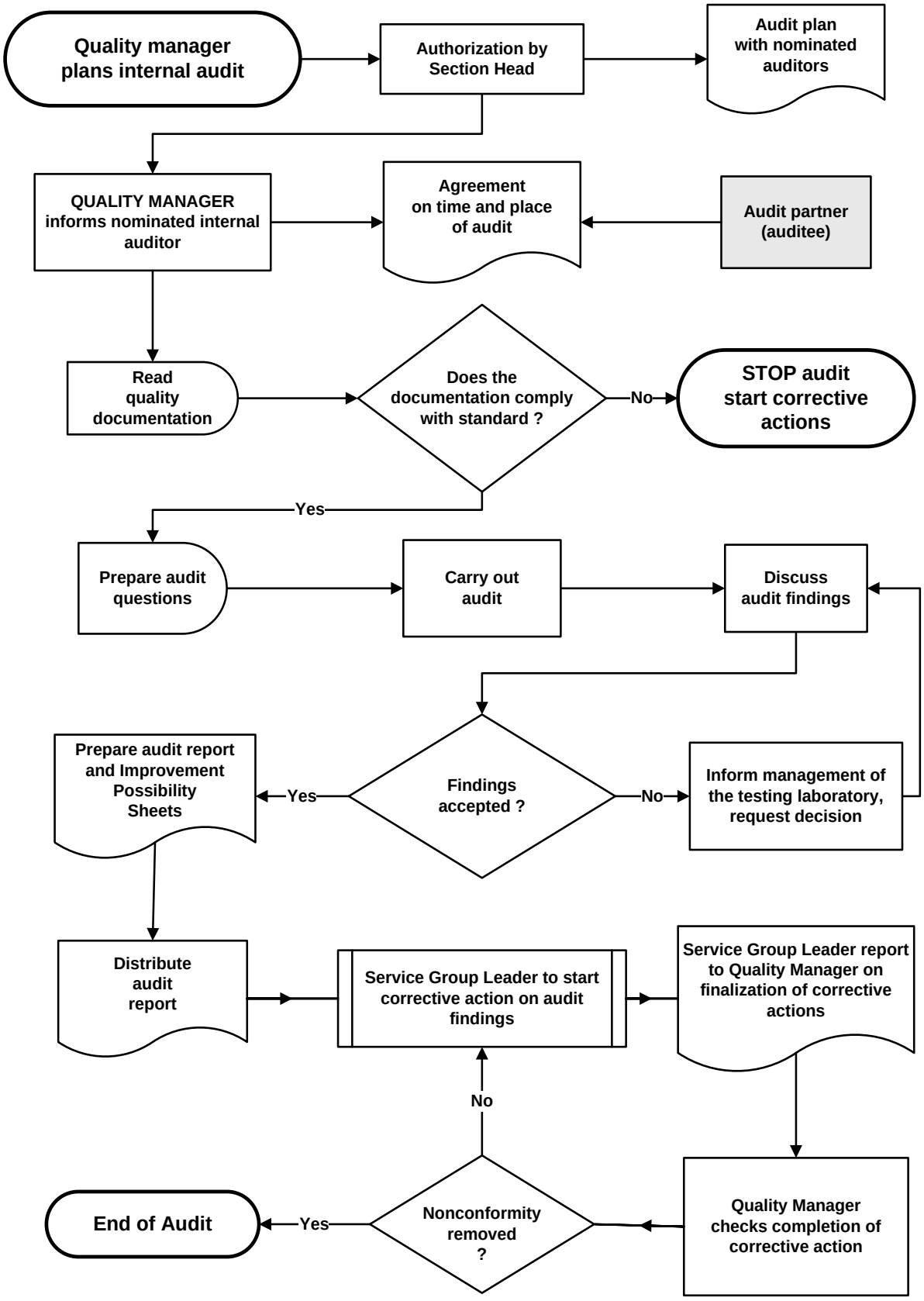
The regular annual audit shall comprise a workload of not more than two weeks for the auditor(s) and shall cover all elements of the standard ISO/IEC17025, which was selected as the basis for the QMS. The preferred time for the audit is the second quarter of the year.

Deviations from this time schedule are possible, if needed to adapt to overriding schedules of third parties influencing the operation of the QMS (e.g.: external audits, emergency actions, general activities of the Agency).

The Quality Manager, when planning the yearly audit, shall keep results of previous audits, recent complaints and nonconformities or problems in mind when selecting the procedures to be audited in a specific Service Group.

The audit plan shall contain name and number of clauses in the standard, name of the Service Group and technician(s) which are auditee(s) for these clauses and the name of the auditor(s). It shall be submitted to the Technical Manager not later than at the end of the first quarter of a year. The Technical Manager, by authorizing the plan, starts the audit process and commits the necessary resources.

INTERNAL AUDITS



The Quality Manager, in co-operation with the Technical Manager, shall select members of the staff to be trained as Internal Auditors and, depending on the funding available, shall decide which training plan should be authorized. If this is not feasible, an outsider to the testing laboratory may be invited as Internal Auditor. This person shall provide proof of training as an auditor and shall accept in writing the terms of confidentiality attached to the audit.

The authorized audit plan is then distributed by the Quality Manager to the auditees and the auditors. Auditor and auditee will have to agree on an exact audit date, which enables the audit to be finalized not later than in the second quarter of a year.

The Service Group Leaders submit to an auditor external to the testing laboratory, the relevant quality documentation with the procedures for study. Should the auditor be of the opinion that the documentation does not comply with the applicable standards, he/she will inform the responsible Service Group Leader. The audit will have to be postponed for corrective action.

During the audit, the auditor shall gather enough information to write an audit report and record any documentation used as proof of compliance with the requirement of the standard and the documented quality management system.

Should there be reason to record an improvement possibility / nonconformity (an audit finding), this will be done on the appropriate form (see end of this document). Observed improvement possibilities / nonconformities shall be discussed immediately in order to arrive at a common understanding between audited party and auditor. If possible, the audit partners should try to establish a time for the resulting improving / corrective action procedure.

After this period, a follow-up audit shall be carried out by the Quality Manager to verify the effectiveness of the improving / corrective action. Should the period, needed for improving / corrective action be too long, the follow-up audit may be carried out during the next regular yearly audit.

If no agreement can be reached between the auditor and the audited party over an audit finding, the auditor has to inform the Technical Manager as soon as possible and discuss further actions. The Technical Manager decides, if necessary, after consultations with the auditee.

The (draft version of the) audit report shall contain:

- identification of the audit
- scope according to the audit plan
- date of audit
- list of audit partners
- description of any audit findings
- statement about conformity between documented quality management system and working situation found

This draft report shall be sent to the quality manager and the Service Group Leader of the audited party for comments not later than two weeks after the audit. This can be done by e-mail. If the audited party does not comment on the audit report within two weeks, the report shall be regarded as accepted and shall be finalized by the auditor.

The final audit report with dated signature of the auditor, including any comment made by the audited party, shall be sent to the Management of the Testing laboratory and to the Quality Manager.

A follow-up audit, if necessary, shall be carried out along the same lines by the Quality Manager or a trained auditor if the Quality Manager has been the auditee. The audit shall end only if the follow-up audit shows that the nonconformities are resolved.

6 Records

Authorized audit plan, audit documentation (questions, answers, forms of nonconformity reports), audit report, proof of proficiency of external auditor, to be kept by the Quality Manager.

Improvement Possibility Report No

Part A: Description of Finding		
Requirement by standard ISO17025	Observation	
Signature: Auditor		Date
Part B Possible Improvement Action		
Signature: Service Group Leader		Date
Action will start at		Date
Result can be audited after		Date