

Internal Auditing

ISO 14001:2015

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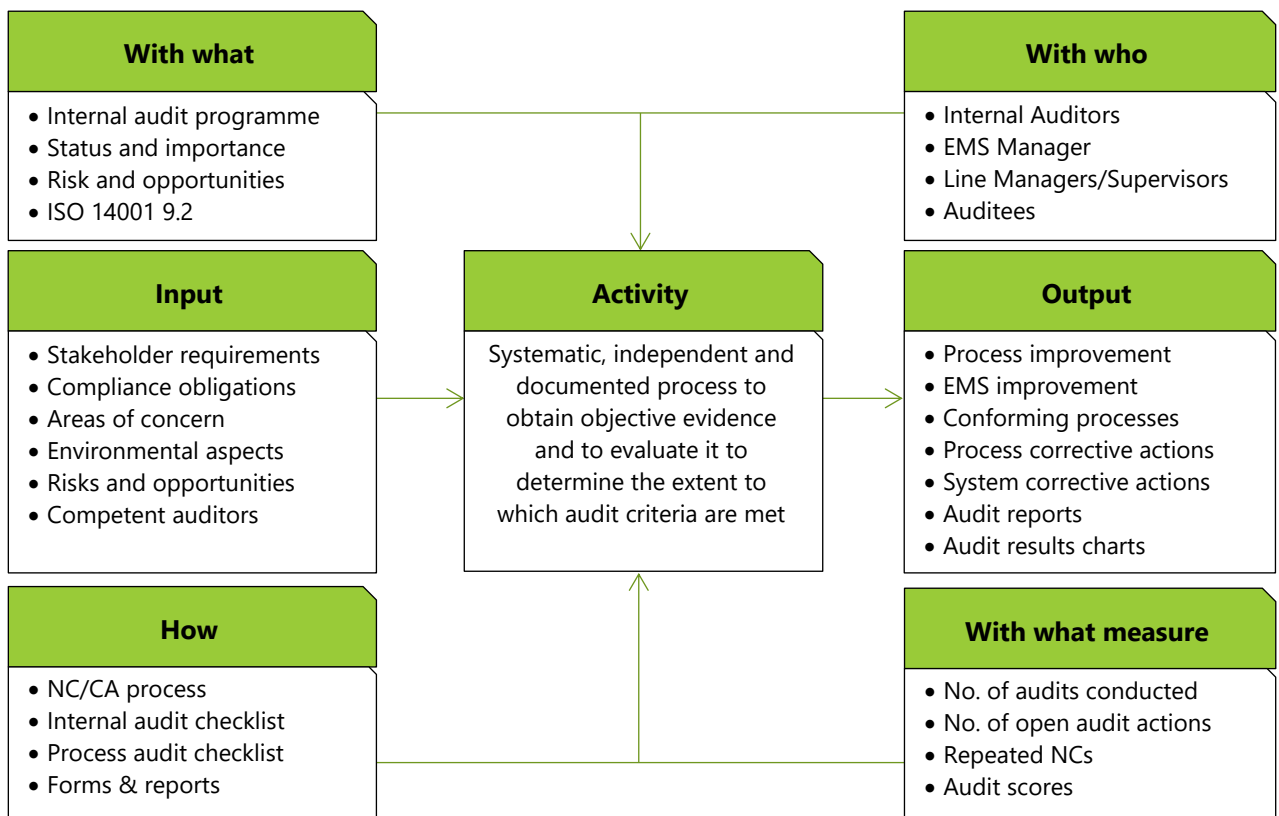
1 Procedure

1.1 Introduction & Purpose

The purpose of this procedure is to define **your organization's** process for undertaking internal audits, process audits, and supplier and legislation audits in order to assess the effectiveness of the application of our environmental management system and its compliance with ISO 14001. This procedure also defines the responsibilities for planning and conducting audits, reporting results, and retaining associated records.

1.1.1 Process Overview

The process overview (turtle diagram) provides internal and external auditors, process owners, and participants an overview of the elements that are required by the internal audit process:



1.1.2 References

Standard	Title	Description
BS EN ISO 14001:2015	Environmental management systems	Requirements
BS EN ISO 14004:2016	Environmental management systems	Guidelines for implementation
BS EN ISO 19011:2018	Auditing management systems	Guidelines for auditing

1.1.3 Terms & Definitions

Term	Definition
Conform	All indicators and audit results show stability
Minor NC	Poor performance, adverse trends, expected results not achieved
Major NC	Practices are nonconforming, likely to cause compliance issues
OFI	Minor problems exist, with bottlenecks, or potential deficiencies

1.3.1.4 Purchasing Manager

The **Purchasing Manager** is responsible for liaising with suppliers in order to:

1. Plan 2nd Party audits of suppliers;
2. Ensure that key personnel are available for the audit;
3. Attend supplier audits;
4. Provide input for improvement of the audit programme;
5. Coordinate supplier evaluation forms;
6. Monitor the status of supplier corrective action;
7. Prepare supplier audit reports.

1.3.1.5 Internal Auditors

The **Internal Auditors** are required to:

1. Review relevant management system documents and records;
2. Review and prepare the *Internal Audit Checklist*;
3. Arrange audit appointment;
4. Conduct opening/closing meeting;
5. Sample and observe process inputs/activities/outputs;
6. Record objective evidence to verify process compliance or nonconformance;
7. Provide input for improvement of the audit programme;
8. Provide input for improvement of the audit process.

1.3.1.6 Auditees

The **Auditees** are required to:

1. Ensure corrective actions are implemented and are closed out within the agreed timeframe;
2. Minor areas of nonconformance are taken care of immediately;
3. Provide the Auditor with evidence of procedural practices in response to audit questions;
4. Undertake timely corrections to fix immediate problems and corrective actions to prevent recurrence;
5. Ensure the status of corrective actions and any non-conformances are kept up-to-date.

1.4 Internal Audit Process

1.4.1 Auditor Competency

Internal audit resources include the personnel with the necessary skills, training, and qualification. Evidence of auditor qualification is maintained in the employee training files. All auditors are appropriately trained and experienced. Minimum competency requirements have been set as:

1. Secondary or higher education;
2. Familiarity with the five principles of auditing and applying them to the audit process;
3. Work experience: more than five years;
4. Relevant training: provided in-house or externally;
5. Audit experience: demonstrable knowledge/skills.
6. Management system lead auditor training;
7. Technical understanding of the EMS control requirements for the area or subject being audited.

The **Internal Auditors** are selected to ensure objectivity and impartiality of the audit process. This is achieved by selecting a team of auditors from cross-functional departments who have received the appropriate training in the auditing process.

Finding	Criteria Description
Conforms	Audit findings indicate conformity (3.6.11). See ISO 9000:2015. Conforms [+100]. Criteria: All performance indicators, metrics, objectives, audit results, etc., show stability and consistently achieve targets. The process is fully documented and implemented and demonstrates compliance as well as effectiveness. Continue to monitor trends and indicators to determine ongoing stability.
Minor NC	Audit findings indicate a nonconformity (3.6.9). See ISO 9000:2015. Minor [-25]. Criteria: Poor performance, adverse trends, expected results not achieved. Current practices conform but are not documented. Deviation from practice is unlikely to result in the failure of the EMS or process or will not result in the delivery of nonconforming products. Investigate root-cause(s) and implement corrective action by the next reporting period or next audit.
Major NC	Audit findings indicate a nonconformity (3.6.9). See ISO 9000:2015. Major [-75]. Criteria: Practices are nonconforming and likely to cause compliance issues. Likely to have a significant adverse effect on customer satisfaction, product quality, delivery, or profitability. Process not implemented or documented. Implement immediate containment action, investigate root-cause(s), and apply corrective action. Re-audit in 4 weeks.
OFI	Opportunities for improvement (3.3.1) See ISO 9000:2015 or recording good practices. (3.10) Note 2 ISO 19011:2018. Minor problems exist, with weaknesses, bottlenecks, or potential deficiencies, which, if not improved, may lead to nonconformity in the future. Negative or positive situations noted by the auditor but which do not relate to a requirement in the standard.

1.4.3.3 Audit Preparation

Before the audit, the **Auditee** of the work area should ensure that current versions of the following documents are displayed in the work area (available from the **EMS Department**):

1. EMS policy;
2. Names and contact details of first aiders and emergency wardens;
3. Names and contact details of work groups.

Before the audit, the **Auditee** of the work area should ensure that current versions of the following documents are available for the auditors to review:

1. Records of induction and training completed by their workers in the area; all new staff employed in the past 12 months must have completed an induction;
2. Incident reports with attachments demonstrating completion of corrective actions;
3. Risk assessments completed or local risk register for activities, including any related local procedures;
4. Completed building evacuation records containing issues raised during the post-evacuation review and actions taken to correct issues;
5. First aid kit contents are checked and in date;
6. Records of workplace inspections completed in the past 12 months, with attachments, e.g., emails or requests to demonstrate actions taken following inspection;
7. General housekeeping is good, and manual handling risks are minimized;
8. Any legal requirements applicable to the activities of the work area, products, or services, including relevant relationships with contractors or suppliers to the area;
9. Examples of safety information and/or training given to workers, e.g., safety quizzes, practical class notes, manuals, induction records, training, etc.

1.4.3.4 Opening Meeting

The purpose of the opening meeting is to introduce the audit team members to the **Auditee** and establish communication links with the activities being audited. The purpose of the opening meeting is to: