

INTERNAL QUALITY AUDITS PROCEDURE (CIS-P001)

Clarksville-Montgomery County School System

1.0 SCOPE:

- 1.1 This procedure applies to all personnel directing and administering internal management system audits in the Clarksville-Montgomery County School System.

2.0 RESPONSIBILITY:

- 2.1 Management Representative
- 2.2 Continuous Improvement Coordinator

The online version of this procedure is official. Therefore, all printed versions of this document are unofficial copies.

3.0 APPROVAL AUTHORITY:

- 3.1 Management Representative

4.0 DEFINITIONS:

- 4.1 CIS: Continuous Improvement System
- 4.2 Internal Audits: Audits conducted to determine if the Continuous Improvement System of the Clarksville-Montgomery County School System conforms to the requirements of ISO 9001:2008 as well as documented procedures and processes and is effectively implemented and maintained.
- 4.3 Internal Auditors: CMCSS employees selected to perform internal continuous improvement audits. These employees attend scheduled auditor training, pass the competency test and are objective and impartial of the process/procedure being audited. No auditor is permitted to audit his or her own work.

5.0 PROCEDURE:

- 5.1 The Internal Audit Schedule (PRM-F006) is developed and maintained by the Management Review Representative and Continuous Improvement Coordinator.
 - 5.1.1 Lead auditor and internal auditors are given schedule.
- 5.2 Under the direction of the Lead Auditor, internal auditors, referring to Internal Audit Activity Plans ([PRM-W001](#) or [PRM-W002](#)), plan the audits by preparing appropriate checklists and worksheets.
 - 5.2.1 An Internal Audit Notification ([PRM-F100](#)) is sent to the department(s) selected to be audited along with the Audit Preparation List ([CIS-G002](#)).
 - 5.2.2 Audit is conducted.
 - 5.2.3 Internal Audit Feedback Form ([PRM-F106](#)) is submitted to each person audited. This feedback is used to continuously improve the Continuous Improvement System internal audit procedure.

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- 5.3 Internal auditors at the conclusion of the internal audit prepare an Internal Audit Report ([PRM-F108](#)).
- 5.3.1 In the event that the internal audit uncovered nonconformities (concerns) in the Continuous Improvement System, the internal auditor completes an Internal Audit Correction Report ([PRM-F109](#)) and submits all documentation to the Continuous Improvement Coordinator through the lead auditor.
- 5.3.2 The Continuous Improvement Coordinator applies any necessary control numbers to process correction requests, updates Corrective Action Log (PRM-F010), and makes appropriate copies.
- 5.3.3 The responsible manager of the area(s) audited responds to the corrective action in the time frame specified on the form, and returns the form to the Continuous Improvement Coordinator.
- 5.3.4 The Continuous Improvement Coordinator reviews the stated corrective action, forwards response to requesting auditor, modifications are requested if needed.
- 5.3.5 When the implementation date of the corrective action has been reached, the Continuous Improvement Coordinator assigns the follow-up activity to requesting internal auditor/designee who reports on the implementation of corrective action. The results are recorded on form.
- 5.3.6 The form is then returned to the Continuous Improvement Coordinator who updates CA Log and takes any appropriate action resulting from the follow-up.
- 5.4 The Continuous Improvement Coordinator prepares an Internal Audit Summary Report for review by the Management Review Team.
- 5.4.1 This report is forwarded to the Internal Auditors and the personnel audited.

6.0 ASSOCIATED DOCUMENTS:

- 6.1 Internal Audit Schedule (PRM-F006)
- 6.2 Internal Audit Notification ([PRM-F100](#))
- 6.3 Internal Audit Checklist ([PRM-F102](#))
- 6.4 Open Meeting Agenda (PRM-F104)
- 6.5 Sign-In Sheet ([PRM-F105](#))
- 6.6 Internal Audit Feedback Form ([PRM-F106](#))
- 6.7 Closing Meeting Agenda (PRM-F107)
- 6.8 Internal Audit Report ([PRM-F108](#))

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- 6.9 Internal Audit Correction Report ([PRM-F109](#))
- 6.10 Corrective Action Log (PRM-F010)
- 6.11 Audit Preparation List ([CIS-G002](#))
- 6.12 Internal Auditing Activity Plan ([PRM-W001](#) or [PRM-W002](#))
- 6.13 Internal Audit Summary Report

7.0 RECORD RETENTION TABLE:

<u>Identification</u>	<u>Storage</u>	<u>Retention</u>	<u>Disposition</u>	<u>Protection</u>
All forms listed in Section 6.0, Internal Audit Summary Report	Hard copies PRM Coordinator Files	Indefinitely (used for tracking)	Permanent	Back-up copies on CIS Support Staff Computer
Corrective Action Log	Computer	On going maintenance	Archive	Back up on server

8.0 REVISION HISTORY:

<u>Date:</u>	<u>Rev.</u>	<u>Description of Revision:</u>
12/13/02		Initial Release
2/03/03	A	Replace Corrective Action Request Form (PRM-F005) with Internal Audit Correction Form (PRM-F008), deleted PRM-F005 from Associated Documents
9/04/03	B	Replace Internal Auditors for Continuous Improvement Staff in 5.3.1, add Corrective Action Log to 5.6, add new 5.9 and renumber, add 6.9
4/11/06	C	Update procedure to reflect process/departmental auditing and new forms
8/22/07	D	Update to reflect PRM-F022 and a change to 5.1.1
5/28/08	E	Clarify procedure, update with Root Cause Committee and add new 6.2, renumber and add 6.15.
8/26/08	F	Update form numbers, remove obsolete forms, add new 5.3.5 renumber, add new 6.5 renumber
1/5/2012	G	Changed Process Management to Continuous Improvement, Took out Root Cause Committee (MRT will serve this purpose), deleted PRM-F006a, PRM-F110, PRM-F103, added PRM-F104 and PRM-F107. Other edits as highlighted and noted on attachment.

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