Document ID: OAK-IQA-PR

Internal Quality Audit Process

Version 2.0.1

01-Aug-11

#27, NGEF Lane, Off 100 Feet Road,
Indiranagar 1st Stage,
Bangalore-560 038
Ph: +91 80 4126 7681
e-mail: asmita@oaksys.net
http://www.oaksys.net

Owner: MR

Approvals
Name: Pradeep P. Oak **Designation:** Director

Signature: **Approved On: 01-Aug-11**

Distribution List: Director, MR, Library

Abstract: This document describes the procedure to be followed for carrying out Internal Quality Audits. IQAs are to review the suitability and implementation of the Quality Management System.

CHANGE HISTORY

Version	Release Date	Authors	Review team	Description
1.0a		Swati.K.Patted	Pradeep, Asmita , Pai, BRB,	Draft
1.0	15 July 2003	Swati.K.Patted	Pradeep, Pai Bala, Swati, Asmita, Santosh, Ben, Manik	Sec 1.4, 2.0, 5.7
1.1a				Section 9.0 Forms AOR & NCR are changed.
1.1	29 Aug 2003	Ramesh	Asmita	
1.2	06-Sept-03	Ramesh	Asmita	CR(26)-To include SCM audit checklist in Minimal Checklist for Internal Quality Audit mentioned in Section 9.1 CR(13)- In Auditors observation Report, ' Number of Auditees' changed to 'Name of Auditees'
1.3	14-Oct-03	Ramesh	Asmita	As per CR(80) NCR report updated for MR sign,Acceptance, no change in this doc.
1.4	03-Jan-04	Asmita	Pradeep	CR85 special IQA for short duration projects included.
1.5	15-Sep-04	Asmita	Pradeep	CR 149 Section 5.4 was updated and new NCR template was added to accommodate CR 148
1.6	13-Apr-05	Prashant S.O	Umesh Reddy	Address, email-ID and Phone number was changed as per CR151 in the first page of the process. Section numbering was corrected as per CR 206.
1.7	15-Jun-06	Deepa G C	Asmita	The Phone Number was changed as per the CR 262 in the first page of process.

1.8	23-Jul-07	Asmita	Asmita	AS per CR 256 modification in IQA notice template is done ne version 1.1
1.9	10-Aug-09	Asmita	Pai	CR 386: ISO 9001:2008 incorporated CR 388: Address change
2.0	25-Mar-11	Asmita	Pradeep	CR 403: AOR change for Strength, positive observation and improvement, negative observation can be use interchangeably used
2.0.1	01-Aug-11	Vinoth	Pai	CR 406: Address change

TABLE OF CONTENTS

1.0 INTERNAL QUALITY AUDIT PROCESS

1.1 Purpose

This document describes the process to be followed in conducting Internal Quality Audits. Periodic Internal Quality Audits are to review the suitability and implementation of the defined Quality Management System, and to check their effectiveness and efficiency in achieving Quality Policy and Quality objectives.

1.2 Scope

Internal Quality Audit process applies to all the areas of Quality Management System.

1.3 Target Audience

1.4 All the members of Oaksys

1.5 Glossary

NC- Non Conformance
Auditee- One who gets audited
Auditor- One who audits
CA—Corrective Action
CAPA – Corrective Action and Preventive Action
CI- Configuration Item
HBD – Head Business Development
HO & D – Head of Operations & Delivery
IQA- Internal Quality Audit.
ISO- International Organization for Standardization.
Lead Auditor- The person responsible for entire Audit cycle activities
MR- Management Representative
NCR- Non Conformance Report
Oaksys- Oak Systems Pvt. Ltd.
PA—Preventive Action
PL – Project Leader
QMR- Quality Management Review.
QMS – Quality Management System
QRT- Quality Management System Review Team.
SCM- Software Configuration Management
SQA- Software Quality Assurance
TM—Team member

1.6 References

- Quality Management System Requirements IS/ISO 9001:2008. Clause: 8.2.2, 8.5.2
- International Standards ISO 90003
- Peer Review Process- OAK-PR-PR

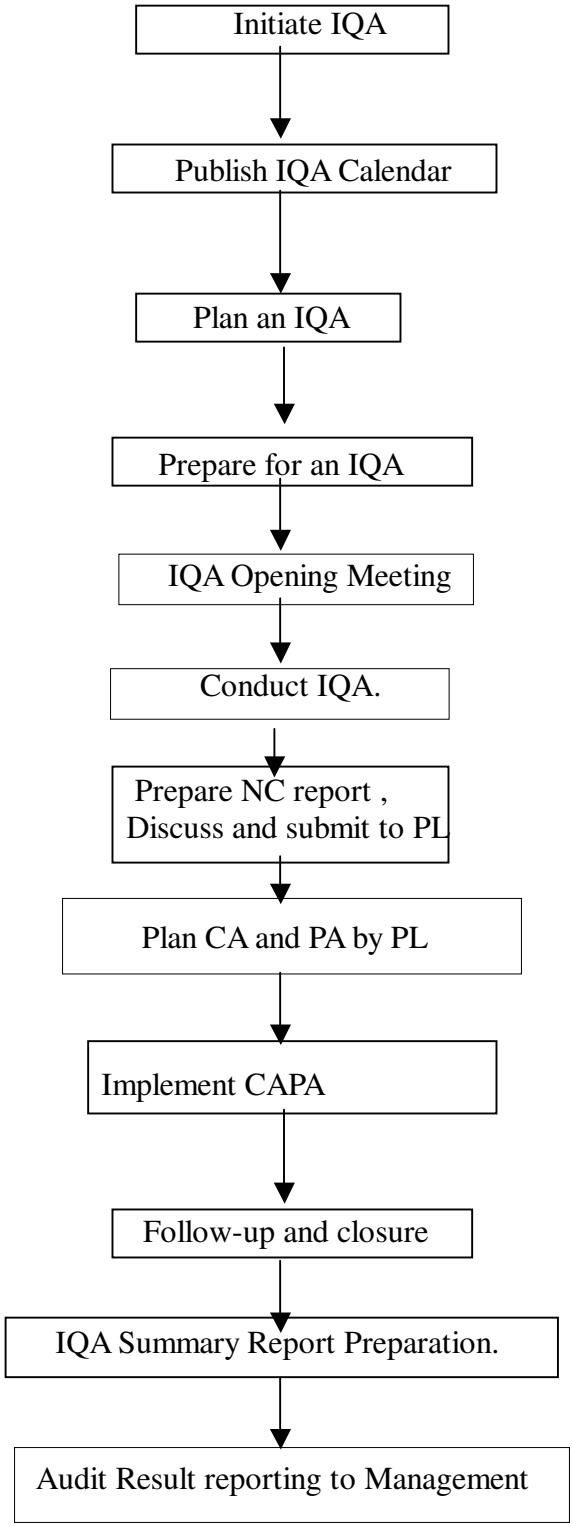
2.0 ENTRY CRITERIA

- Approved Annual Audit calendar
- MR appoints Lead Auditor for the audit cycle
- Documents to the audited are baselined and submitted to the Lead Auditor

3.0 RESPONSIBILITY

Role	Skills	Responsibilities
MR	Experienced in IQA process	• Sole responsibility of initiating and coordinating IQAs. • Preparation of Annual IQA Calendar • Appointment of Lead Auditor • Coordinate Audits with Lead Auditor. • Report IQA summary Director.
Lead Auditor	Must have th experience of Auditin at least two projects	• Ensuring IQA coverage as per schedule. • Coordinating activities of the IQA team. • Agreeing on NCs and corrective action to be taken. • Preparing IQA summary report. • Conducting opening and closing meetings. • Submitting report to Head Quality along with metrics.
Auditor	Should be involved in Auditing activities of one or more projects	• Preparing for the IQA, as planned. • Auditing the project as per schedule. • Providing findings to lead Auditor • Providing metrics to lead Auditor
Project Leader	Should have a vast experience of leading or managing one or more teams at a time.	• Co-operating in IQAs. • Making the team available during IQAs. • Participating as an Auditee, if needed. • Commit to take corrective action on NCs, if any.
Project Team	Should have the knowledge of IQA process	• Participating in the IQA as Auditee, if required. • Co-operating with positive mindset.

4.0 PROCESS FLOW DIAGRAM



5.0 PROCESS DESCRIPTION

Quality Management System IQA is a planned activity to maintain and ensure effective implementation of the QMS, which is a mandatory requirement of ISO 9001-2008. Trained internal Auditors conduct these IQAs as scheduled in the Annual IQA calendar. IQA results and corrective action reports are submitted to MR for review and implementation follow up

5.1 Internal Auditors and their training

Usually Staff in the position of Leaders and Senior Engineer are considered as internal auditors. If required, they can be trained on Internal Quality Audit skills. The internal Auditors will participate in IQA of groups and projects, which are independent of their groups and project. Audit training can be through self study, audit observation or a classroom training. Audit training records are kept with the MR. Internal auditors will be assigned different areas of audit for each cycles of IQA to maintain and improve the effectiveness of the internal quality audits

5.2 IQA Initiation

- The MR prepares the Annual IQA Calendar covering the entire QMS during the beginning of the calendar year, using Annual IQA Calendar OAK-IQA-FR-IQAC.

5.3 Publish IQA Calendar

- As scheduled in the Annual IQA Calendar the MR will initiate the internal IQA. The MR will prepare a detailed IQA Schedule in consultation with concerned Project Leaders well in advance. The IQA calendar provides the timeframe in which on-going projects will be audited. If any project is of short duration, special IQA can be requested by the PL, so that audit happens during the project tenure. This audit for consolidation shall be considered in the next coming IQA cycle.
- The IQA schedule is notified using the standard IQA Schedule Notification. OAK-IQA-FR-IQAN.
- The project to be audited is notified well in advance.

5.4 Plan an IQA

- MR identifies the IQA team and assigns Lead Auditor.
- The Team is drawn from an organization wide pool of Auditors..
- The Lead Auditor checks projects for entry criteria.
- Lead Auditor and Project Leader/ Project SQA agree on objective for the IQA.
- Lead Auditor decides an ‘IQA baseline’ in consultation with PL and collects the baseline documents well in advance before the IQA.

5.5 Prepare for an IQA

- IQA teams familiarize themselves with project documents.
- A minimal checklist is provided in appendix. The auditors can add any project specific checkpoints and prepare their own checklist if required.

5.6 IQA Opening Meeting

The Lead Auditor shall conduct the opening meeting. The MR, Lead auditor, Auditors and PLs shall participate in the opening meeting. Purpose & Scope of the IQA cycle are explained, schedule for the closing meeting and expected completion time for corrective actions of NCs are discussed in the opening meeting. The lead auditor explains the following.

- Emphasize that the projects shall be audited against their Plan.
- Explains what a discrepancy or non-conformance is and the method of reporting.
- Explains the details, timing and purpose of closing meeting.
- Invite any questions about IQA.

5.7 Conduct IQA

IQAs are conducted as per the IQA schedule. Project Leader introduces the IQA team to the project team members and explains the intent, scope and objective of IQA.
The auditor can use the **Minimal Checklist OAK-IQA-CL-MIN.** provided as guideline. The Auditor interviews the selected people in the project(s)/group(s), examines the documents, and looks for evidences of QMS implementation from the quality records generated. The Auditor shall make notes of observations during the IQA in the **Auditor's Observation Report OAK-IQA-FR-AOR**. The Lead Auditor ensures that

- IQA is conducted as planned and resources are deployed as required.
- Entire scope of IQA is covered.

5.8 Documenting non-conformance

After corroborating the evidence on non-conformities, the Auditors discuss it with the Lead Auditor and *Non-Conformance report* (NCR) is written on each NC and reported, giving details of NC description, objective evidence, the ISO clause, corrective & preventive actions proposed etc. (**Non Conformance Report - OAK-IQA-FR-NCR**).

5.9 Plan CA/PA for NCs

- Lead auditor discusses the NC reports with the PL and obtains the appropriate corrective and preventive actions and a date by which the non-conformity shall be removed.
- The PL along with the team members comes up with corrective and preventive actions. These proposed actions are to be approved by the Lead Auditor/MR.

5.10 Implement Corrective & Preventive Actions

The auditee is responsible for providing the timely corrective actions for the NCs raised during the IQA as per plan.

5.11 The IQA Summary report

Lead Auditor prepares the **IQA Summary report OAK-IQA-FR-IQAR** which gives details of all Project wise, ISO clause wise and Process wise NCs. Management Representative maintains the trend of nonconformance in every IQA through out IQA cycle.

5.12 Closing meeting

The Lead Auditor conducts the closing meeting. The MR, Lead auditor, Auditors and PLs shall participate in the closing meeting. The Lead Auditor summarizes the IQA findings, and the Organization wide NCs and presents them to the project members so that the projects / activities across the Organization can take proper corrective actions.
The Lead Auditor should

- Thank the project members for help and co-operation**.**
- State that IQA is a sampling exercise.
- Hand over copies of individual NC reports.

5.13 Follow-up and closure

The IQA team, on the date agreed for closing of implementation of all corrective actions, will take up the follow up IQA for verifying the compliance and effectiveness of the corrective actions implemented. They will then report the results to the MR. MR upon receipt and verification of the follow up IQA report closes the NCs if they are complied or repeats the NC if it is not complied within the agreed date or if it is not effective.

5.14 IQA result reporting to Management

MR presents the finding of the IQA in the next Quality Management Review, the status of the NCs, Corrective / Preventive Actions as evidenced by the IQAs. Essentially the IQA reports the suitability of the QMS, its strengths & weaknesses, and the remedial measures proposed for improvement, along with the timeframes agreed for implementation.

5.15 Escalation Mechanism

The IQA team is encouraged to resolve all compliance issues with the Project Leader and project team member. For issues not resolvable within the project, are escalated to the appropriate level of Management.
Similarly any issue during any step in the IQA process, which cannot be resolved at MR, Lead Auditor and auditor level, can be raised to appropriate higher level of management.

6.0 DELIVERABLES AND QUALITY RECORDS

- Annual IQA Calendar OAK-IQA-FR-IQAC.
- IQA Schedule Notification OAK-IQA-FR-IQAN.
- Auditors Observation Report OAK-IQA-FR-AOR.
- Non-Conformance Report OAK-IQA-FR-NCR.
- IQA Summary report OAK-IQA-FR-IQAR.

7.0 VERIFICATION

- Review by the MR to ensure compliance of IQA with respect to IQA calendar
- Approval of Corrective/Preventive action by the MR
- Review of implementation of Corrective/Preventive actions by the MR
- Review of IQA Summary Report by Directors and QRT during next QMR.

8.0 EXIT CRITERIA

- Closure of Non-Conformances after verifying the effectiveness of the corrective actions implemented.
- IQA Summary report prepared.

9.0 APPENDIX

9.1 Minimal checklist OAK-IQA-CL-MIN

9.2 Annual IQA Calendar OAK-IQA-FR-IQAC

9.3 IQA Schedule OAK-IQA-FR-IQAN

9.4 Auditor's Observation Report OAK-IQA-FR-AOR

9.5 Non-Conformance Report OAK-IQA-FR-NCR

9.6 IQA Summary Report OAK-IQA-FR-IQAR