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	Title INTERNAL AUDIT & CORRECTIVE ACTION				
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1 PURPOSE

The purpose of this procedure is to define mechanism and responsibilities for planning, conducting, reporting internal audits and taking corrective actions against non-conformances.

2 PROCESS OWNER

Manager Manufacturing Excellence (MR) is overall responsible for this procedure at Packages Convertors Ltd. However, departmental Managers will co-ordinate with MR for implementation of corrective actions in their areas of responsibility.

3 INTERNAL AUDITS ARE INTENDED TO VERIFY:

- (a) Does Packages Convertors Ltd documented systems comply with the requirements of IMS?
- (b) Is the documented system implemented and maintained?
- (c) Is the implementation effective in achieving Packages intended plans, Goals and Objectives?
- (d) Does the system enable Packages to continually improve its performance of IMS?


4 SCOPE

This procedure applies to all activities and locations which are under the scope of IMS at Packages Convertors Ltd.

5 AUDIT RESPONSIBILITIES AND PLANNING

For Internal Audits, **MR** is responsible for planning and scheduling, initiating of audits, nominating suitably qualified lead auditors/auditors for specific audits, ensuring auditors are trained, maintaining audit records, and reporting the results of audits to top management for review.

- a) **MR** prepares the audit plan on 'Audit Plan format' QR/06. A complete system audit is done once in a calendar year. However additional audits may be planned based on status and importance of activity and results of previous audits.
- b) Audit Plan (schedule) may be revised and reissued (updated on intranet) according to need.
- c) The audits are carried out against the requirements of **IMS** as well as Packages

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Convertors Ltd own documented requirements.


- d) **MR** communicates about audit to all concerned departments.
- e) **MR** nominate auditors for each audit.
- f) **MR** maintains audit records.
- g) The auditors can either use the audit checklist or can just take the notes during the audit.
- h) Auditors/ **MR** prepare NCRs on format “IMS-Man-Ex-F-09” and give one copy to auditee or raise NCRs on QA Corrective Action Request System in Packages intranet.
- i) Lead auditor prepares audit report summary and submits to **MR** after each audit & **MR** issue final Audit Report to relevant department on format “IMS-Man-Ex-F-21”.
- j) Top management reviews the results of audits during management reviews.

6 AUDITOR’S COMPETENCY

- a) Personnel assigned to carry out audits are independent of those having direct responsibilities for the activity under audit. This is to ensure objectivity and impartiality of audit process.
- b) Personnel nominated to perform internal audits must be trained as follows:
 - For Internal audits: Training on ISO **9001:2015**, two day training on auditing techniques and minimum one day practical training (under the guidance of a trained auditor) on QMS systems.

7 CONDUCTING THE AUDIT

- a) Auditors will use the following documents for conducting audits:
 - QR/06.....Internal Audit Plan
 - QR/07 IMS-IP-F-20.....Audit checklist (optional)
 - IMS-Man-Ex-F-09.....NCR Form
 - IMS-Man-Ex-F-21.....Internal Audit Report
- b) Auditors would familiarize themselves with the task and documents of the auditee department.
 - When non-compliance is noted during the audit, it is brought to the attention of, and discussed with the Auditee/ Departmental Manager/. Each non-compliance noted is documented on the IMS-Man-Ex-F-09.....NCR Form

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- c) . One copy of Corrective action request form is handed over to Auditee (Unit Heads) for implementing corrective action or raise NCRs on QA Corrective Action Request System in Packages intranet.
- At the end of the audit, Lead Auditor prepares Audit report and hands over audit report to MR & MR issue final Audit Report to relevant department on format “IMS-Man-Ex-F-09.....NCR Form and IMS-Man-Ex-F-21
- d) MR maintains complete audit records.
- e) **MR will also ensure that the risks and opportunities determined during planning are update time to time.**


8 CORRECTIVE ACTION AND FOLLOW-UP AUDIT

- a) Upon receiving the NCR, the concerned Unit Head himself or through any other concerned persons (except auditors) of the unit/IMS/QEHS department investigates the root cause of the non-conformance. He also will do **correction the problem and mention** corrective action indicating the date by which it will be fully implemented.
- b) The root cause investigation results and the corrective action taken is recorded on corrective action request form in system.
- c) **Correction of problem**, root cause **investigation** and required corrective action must be identified without undue delay after raising the non-conformances by MR.
- d) **Departmental** Head ensures that the corrective action is implemented without undue delay to eliminate causes of non-conformities.
- e) As soon as the corrective action is completed the Unit Head informs **MR** or the auditor to conduct follow-up in order to determine if the corrective action has been implemented and if it is effective. This however must always be done at the latest by the date specified for corrective action completion in the form/NCR.
- f) When there is objective evidence that the corrective action is effective, the NCR is closed out by Auditor **or MR**.
- g) If more work is needed, to fully implement the corrective action, a new follow up date is agreed upon. Departmental Head ensure that they take corrective actions in a manner that is **TIMELY** and without undue delay.
- h) Potential non-conformities are identified through Quality Risk Assessment (QMS/03)**

9 WHEN TO RAISE CORRECTIVE ACTIONS:

Corrective actions can be initiated in following cases:

- a) Internal/ External Audits

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- b) Internal / External Customer Complaints
- c) Internal Product Non-conformances
- d) Process/ System Non-conformances
- e) On the basis of the results of monitoring and measurement
- f) Recommendations from top management during QMS management review meetings

NOTE: MR can raise CAR, anytime during the year, if non-conformity observed against ISO 9001 and documented procedures.

10 ASSOCIATED DOCUMENTS

- Internal Audit Plan QR/06
- Audit Check Sheet QR/07
- Corrective Action Request Form (NCR) QR/05
- Internal Audit Report IMS-IP-F-09
- **Correctives Action Request form in Intranet System**

End of Document