

**2019**

# **SADCA INTERNAL AUDIT PROCEDURE**

## **SOUTHERN AFRICAN DEVELOPMENT COMMUNITY COOPERATION IN ACCREDITATION**

*This document describes the procedures that SADCA will follow to perform its Internal Audits.*

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## 1. PURPOSE

This procedure describes the Southern African Development Community Cooperation in Accreditation (SADCA) shall follow in executing internal audits of its Management System, which also includes the Mutual Recognition Arrangement (MRA) management process.

## 2. REFERENCES

- 2.1 The SADCA Quality Manual, and any other associated MRA Policy and Procedures documents.
- 2.2 IAF/ILAC A1: IAF/ILAC Multilateral Mutual Recognition Arrangements: Requirements for Evaluation of a Regional Group.
- 2.3 IAF/ILAC A2: IAF/ILAC Multilateral Mutual Recognition Arrangements: Requirements for Evaluation of a Single Accreditation Body.

## 3. SCOPE OF THE INTERNAL AUDIT

- 3.1 The internal audit shall cover activities of the SADCA MRA Committee and MRA Council, the Secretariat and the SADCA Management System.
- 3.2 The scope will be determined by the Executive Committee (EXCO) Chair in consultation with the EXCO.

## 4. INTERNAL AUDIT TEAMS

The Internal Audit shall be conducted by a team leader and if necessary, team members selected on the basis of competence, independence and objectivity taking into account the functions/areas to be audited.

### 4.1 Qualifications of Internal Audit Team Leaders and Members

4.1.1 An internal audit team leader and any team member(s) shall be an individual with:

- Knowledge of the requirements of ISO/IEC 17011;
- Knowledge of the requirements of the IAF/ILAC A series and mandatory documents;  
and
- Experience in accreditation.

4.1.2 An internal audit team leader or team member should preferably be a qualified peer evaluator that has participated in a peer evaluation of an accreditation body.

### 4.2 Selection of Internal Audit Teams

4.2.1 The team leader of each internal audit shall be selected by the EXCO Chair in consultation with the EXCO.



- 4.2.2 One or more team members (if necessary) shall be selected by the EXCO Chair in collaboration with the team leader.
- 4.2.3 The team leader and team member(s) shall not evaluate the activities for which he/she is responsible for implementing in SADCA.

## **5. IMPLEMENTATION OF THE INTERNAL AUDIT**

### **5.1 Frequency of Internal Audits**

- 5.1.1 The internal audit shall be conducted at appropriate intervals determined upon review of the latest audit results by the SADCA Chair in consultation with the EXCO. As a minimum SADCA shall conduct Internal Audit at least once every two years.

### **5.2 Preparation of Internal Audits**

- 5.2.1 The team leader shall determine the dates of the internal audit in consultation with the team member(s) where applicable, and with the agreement of those being audited.
- 5.2.2 The team leader shall ensure that copies of the current SADCA documentation and other related documentation are available to the team member(s), if any, at least one month before the commencement of the audit.
- 5.2.3 The team leader shall prepare a detailed internal audit plan in consultation with the EXCO Chair and audit team members, if any.
- 5.2.4 The team leader shall send the audit plan to the SADCA Secretariat at least two weeks before the internal audit.
- 5.2.5 The internal audit plan shall contain the following as minimum requirements:
  - 5.2.5.1 The objective of the audit;
  - 5.2.5.2 The scope of the audit;
  - 5.2.5.3 The date(s) of the audit;
  - 5.2.5.4 Whether the audit will be conducted at the SADCA offices, or by electronic means;
  - 5.2.5.5 The names of the team leader and team member(s) (where applicable);
  - 5.2.5.6 The requirements and documents to be considered; and
  - 5.2.5.7 Where applicable, identification of SADCA personnel that will be required for particular audit activities.

### **5.3 Execution of Internal Audits**

- 5.3.1 The team leader shall verify effective implementation of SADCA MRA Policies and Procedures and related standards/requirements by auditing relevant records, reports, documentation, meeting resolutions, and/or minutes, and by interviewing the Secretariat and any other SADCA personnel, as needed.
- 5.3.2 The audit shall be conducted during a meeting with the SADCA Secretariat or by electronic means.
- 5.3.3 If an electronic audit is conducted, the team leader may consult by email or telephone, as appropriate.



5.3.4 SADCA may reimburse the employer of the team leader and each team member (if any) for the travel and incidental expenses incurred in executing the internal audit, as agreed in advance.

## 5.4 Internal Audit Reports

5.4.1 The team leader shall prepare a written draft summary on the audit, findings and observations using SADCA F011 "Internal Audit Report Form".

5.4.2 Findings of the audit shall be classified as either a:

5.4.2.1 Non-conformity: Where SADCA does not meet a requirement of an applicable standard(s), its own management system or an SADCA or applicable ILAC/IAF requirement;

5.4.2.2 Comment: Where SADCA documents or practices have a potential for improvement, but still fulfils the requirements.

5.4.3 Findings shall be clearly recorded on SADCA F011, making reference to the specific clause of the relevant document and/or standard.

5.4.4 A verbal report, where appropriate, and a copy of the draft audit report and findings shall be given to the SADCA Secretariat at the closing meeting at the end of the internal audit.

5.4.5 The team leader shall give the SADCA Secretariat an opportunity to comment on and discuss the findings and clear up any misunderstandings.

5.4.6 The draft audit report shall be signed by the team leader and team member(s) (if any) and the SADCA Secretariat.

5.4.7 After the audit, the team leader shall complete the internal audit report and forward it to the SADCA Chair and to the SADCA Secretariat within 30 days.

5.4.8 The SADCA Secretariat in consultation with the SADCA Chair, EXCO and other Committees (where appropriate) shall review the report and prepare a proposed corrective action plan and time-schedule for implementation for all non-conformances.

5.4.9 The SADCA Secretariat shall provide a response to each finding identified as a comment.

5.4.10 The SADCA Secretariat shall submit the report and the proposed corrective action plan to the EXCO Members for their review, and to the internal audit team leader within 30 days.

5.4.11 The team leader, in consultation with the team member(s), if any, shall provide a response as to the acceptability of the proposed corrective action plan within 30 days.

5.4.12 The SADCA Secretariat, in consultation with the SADCA Chair, EXCO or other Committees (as appropriate), shall address each non-conformity by:

5.4.12.1 Investigating the root cause of the non-conformance; and

5.4.12.2 Take the corrective action(s) needed appropriate to the impact, and that eliminates the causes of the nonconformance in order to prevent recurrence.

5.4.13 The Secretariat shall provide the team leader with the corrective actions taken, and evidence of effective implementation within the timelines as agreed upon.



Where timelines cannot be met, the Secretariat shall provide the SADCA Chair, EXCO and team leader with justification, and a revised time-schedule for implementation of any specific corrective action.

- 5.4.14 The audit team leader or team member, as appropriate, shall review the corrective action and evidence of implementation in order to verify whether the corrective action taken effectively addressed the non-conformance.

## **5.5 Internal Audit Reviews and Follow up Activities**

- 5.5.1 The SADCA Chair in consultation with the EXCO shall monitor the effective implementation of the corrective actions.
- 5.5.2 The Secretariat shall report on the status of the corrective actions to the SADCA Chair and EXCO Members during their next scheduled meeting, and until such time that all non-conformances raised have been verified by the auditor(s) as appropriately addressed.
- 5.5.3 Any nonconformities shall be followed-up for verification of effective implementation of corrective actions, by the next appointed audit team at the next scheduled internal audit.



## ANNEX A: AMENDMENT RECORD

Section	Change
All	Extensive changes to entire document