PROCEDURE FOR INTERNAL AUDITS

CLASSIFICATION
This document is classified as ARAC Procedures Document.

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AVAILABILITY
A copy of this document in English is available from the ARAC Secretariat and the ARAC website.

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Original: English
1. **Purpose**
   This document describes the procedure that ARAC shall follow to perform an internal audit of the ARAC management system which includes the MLA management process.

2. **Reference Documents**
   - Applicable IAF and ILAC documents, including IAF/ILAC A1 and IAF/ILAC A2.

3. **Scope of Internal Audit**
   The Internal audit shall cover activities of the ARAC MLA Committee and MLA Group, and of the ARAC Secretariat, regarding the MLA management process and the ARAC management system, as determined by the Chair in consultation with the Executive Committee.

4. **Internal Audit Teams**
   The internal audit shall be conducted by team leader and, if necessary, team members.

   4.1. **Qualification of Internal Audit Team Leaders and Members**
   - **4.1.1.** An internal audit team leader shall be a qualified peer evaluation team leader or a qualified peer evaluation team member who has participated as a team member in a peer evaluation of an accreditation body.
   - **4.1.2.** An internal audit team member (if any) shall be a qualified peer evaluation team member.

   4.2. **Designation of Internal Audit Teams**
   - **4.2.1.** The team leader of each internal audit shall be designated by the ARAC Chair.
   - **4.2.2.** one or more team members (if determined to be necessary) of each internal audit shall be designated by the ARAC Secretary, in consultation with the team leader.
   - **4.2.3.** Neither the team leader nor the team member shall evaluate the activities which he/she was responsible for implementing in ARAC.
5. Implementation of Internal Audits

5.1. Frequency of Internal Audits

The internal audit shall be conducted at appropriate intervals determined upon review of the latest audit results by the ARAC Chair in consultation with the Executive Committee.

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) (if any), and with the agreement of the auditees.

5.2.2. The team leader shall ensure that copies of the current ARAC documentation and other related documentation are available to the team member(s) one month in advance of the internal audit.

5.2.3. The team leader shall prepare, in consultation with those persons involved in the audit process, a detailed internal audit plan approved by the ARAC Chair or his/her designee.

Content of the Audit Plan.
The Team leader shall prepare an audit plan that contains as a minimum:

- The objective.
- The scope.
- The date and place.
- The names of the Team leader and team member (if any).
- The requirements and documents to be considered.
- If necessary, identification of ARAC personnel that will be involved with particular audit activities.

The team leader shall send the audit plan to the ARAC Secretariat at least 2 weeks in advance of the audit. The ARAC Secretariat shall ensure that the agreed audit plan is available for the persons involved in the audit process one week in advance of the audit.

5.3. Execution of Internal Audits

5.3.1. The team leader shall check the relevant records against the ARAC MLA Policies and procedures and related documents, including peer evaluation reports, relevant meeting resolutions and/or minutes’ etc.

5.3.2. The audit shall be conducted during a meeting with the ARAC Secretary and the ARAC Quality Manager or remotely.

5.3.3. ARAC may reimburse the employer of the team leader and each team member (if any) for the travel and per diem expenses incurred in executing the internal audit, as agreed in advance.
5.4. **Internal Audits Reports**

5.4.1. The team leader shall prepare a written draft summary on its main finding and observations. Observations and non-conformities shall be stated with reference to the specific clauses of the relevant documents. A verbal report or a copy of the draft summary shall be given to the ARAC representatives at closing meeting at the end of the visit. The team leader shall give the ARAC representatives an opportunity to comment on and discuss the teams findings and clear up any misunderstandings that may have arisen. The summary shall be signed by the team leader and member(s) if any, and the ARAC representatives.

5.4.2. After the visit the team leader shall complete the internal audit report and forward it to the ARAC Chair and to the ARAC Secretary within 30 days.

5.4.3. The ARAC Quality Manager in consultation with the Executive Committee and other committees as appropriate shall review the report and prepare a proposed corrective action plan to improve the operation of the ARAC management system which includes the MLA management system. The ARAC Quality Manager shall submit the report and the proposed corrective action plan with his or her comments to the Executive Committee members and to the internal audit team in a maximum period of 60 days for assurance that the plan would resolve all nonconformities.

5.5. **Internal Audits Reviews and Follow up Activities**

5.5.1. The Executive Committee shall review the internal audit report and the internal audit teams response to the corrective action plan, and approve the corrective action plan at its next scheduled meeting or by email.

5.5.2. The ARAC Quality Manager shall ensure the closure the findings raised during the internal audit as well as the effective implementation of the corrective actions, in consultation with the internal audit team leader, within a maximum period of 6 months after the internal audit.

5.5.3. The ARAC Quality Manager shall report the results of implementation to the Executive Committee Members during its next scheduled meeting.

5.6. **Maintain and control of the internal audit records**

It is the ARAC Secretariat responsibility to maintain and control the internal audit records.