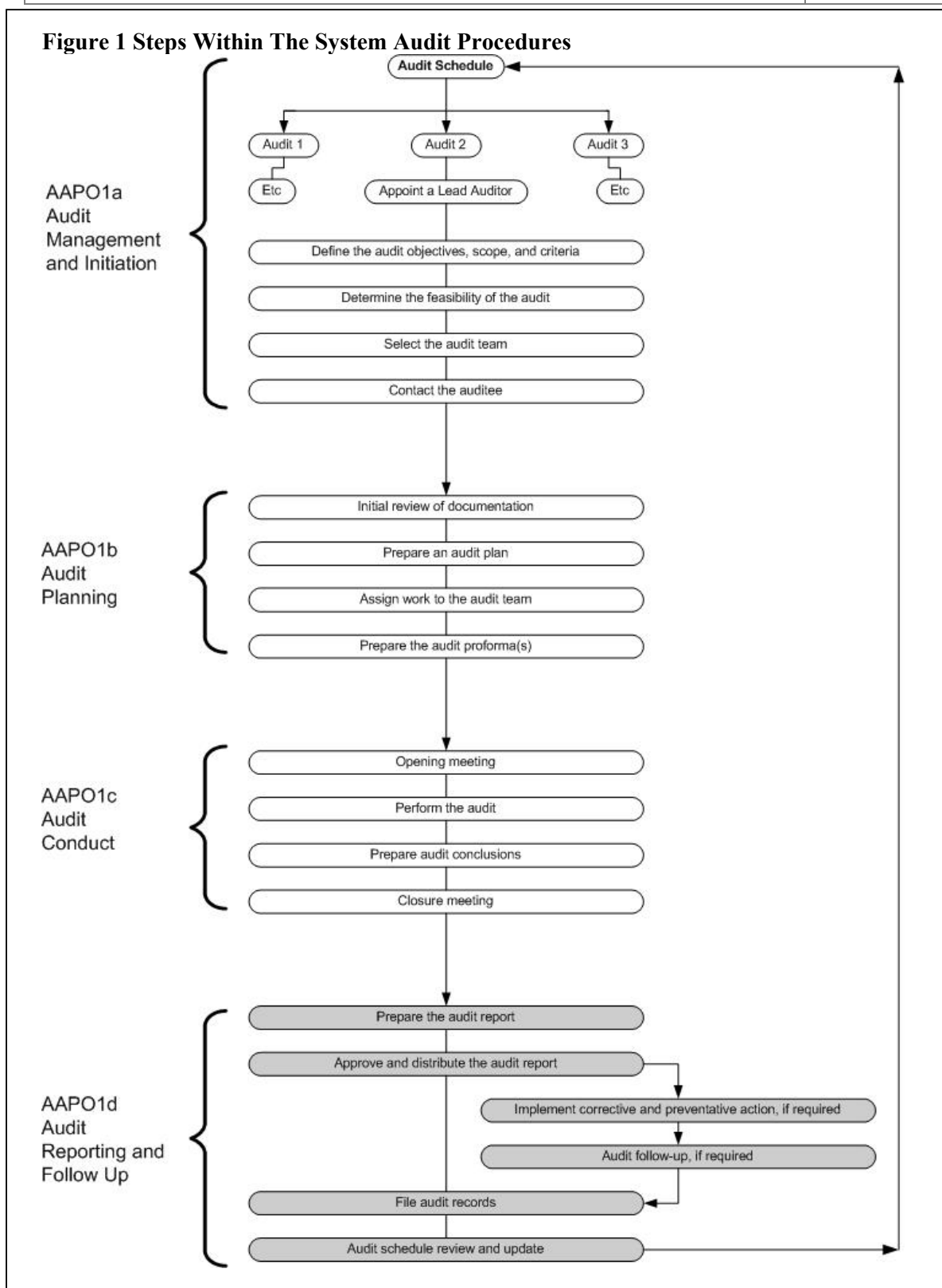


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0	SHOWING CONFORMANCE
0.1	Options
0.1.1	<p>There are three options to demonstrate conformance when applying this system procedure:</p> <ol style="list-style-type: none"> a. Follow the defined system procedure using the recommended guidance and tools, including allowed variations and options. b. Use an equivalent process and tool set generated elsewhere and document evidence of procedural equivalence. c. Use an equivalent bespoke process and tool set for the project and document evidence of procedural equivalence.
1	INTRODUCTION
1.1.1	This fourth and final System Audit procedure deals with the activities to be conducted after the on-site audit has been completed.
1.1.2	<p>Although this and the companion procedures have been produced primarily for use by and on behalf of IPTs, they may also be used by ASEG to carry out audits on the SMS and EMS. In addition, these procedures may also be used for auditing all or parts of an IPT's SMS and EMS by other parties such as:</p> <ul style="list-style-type: none"> • Functional Safety Board Secretariats; • DS&C; • Third Parties invited by CDM; • Independent Safety Auditors; • MOD and TLB Internal Audit Functions; • Equipment system contractor; • Personnel seconded from another IPT; • Customer 2; • SME; • Environmental and Safety Consultants.
1.1.3	Any third party using these procedures should note that they have primarily been written for use by IPTs and therefore may use terminology specific to IPTs. However, this should not preclude a third party from using the procedures.
1.1.4	Throughout the procedures the term 'Audit Client' has been used to describe the group, organisation or individual commissioning an audit, as this may be distinct from the party carrying out the audit.

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2 PROCEDURE OBJECTIVES

2.1.1 The objectives of this procedure are to:

- Produce and circulate an Audit Report, once authorised;
- Ensure that audit records are stored and communicated appropriately;
- Ensure that audit follow-up is planned and that the audit schedule is updated;
- Ensure that any audit reports are provided to ASEG.

3 RESPONSIBILITIES

3.1 Accountability

3.1.1 The Audit Client is accountable for the completion of this procedure.

3.2 Procedure Management and Procedure Completion

3.2.1 The Lead Auditor is responsible for ensuring that this procedure is managed and completed. The Lead Auditor may delegate tasks to members of the Audit Team in regards to the management and completion of this procedure.

4 WHEN

4.1.1 This procedure should be conducted once the on-site audit has been completed, as defined in Procedure AAP01c.

5 REQUIRED INPUTS

- **Form AAP01b/F/01** Audit Plan;
- **Form AAP01b/F/02** Audit Pro-forma(s);
- **Form AAP04/F/01** Non-conformance and Corrective Action Form(s), if relevant (partly complete).
- IPT documentation relevant to the audit;
- **Form AAP01c/F/01** - Audit meeting records

6 REQUIRED OUTPUTS

Audit Report (based on **Form AAP01d/F/01** - Audit Report Template)

Form AAP04/F/01 - Non-conformance and Corrective Action Form(s), if relevant – (fully completed)

OR

Equivalent actions and documentation that ASEG is satisfied achieve the same objectives.

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7	DESCRIPTION
7.1	Step 1 - Prepare the Audit Report
7.1.1	On completion of the audit an Audit Report should be drafted as agreed between the Lead Auditor and Audit Client. The Lead Auditor will be responsible for the preparation and content of this report. Where the audit covered safety and environmental issues, the Audit Client can request that these are reported separately.
7.1.2	An Audit Report will contain the following: <ul style="list-style-type: none"> • Introduction and background to the audit; • Audit dates and locations; (Available from AAP01b/F/01 – Audit Plan) • Audit scope, criteria and objectives; (Available from AAP01b/F/01 – Audit Plan) • Description of audit approach and methodology; • Audit Client; • Audit Team; (Available from AAP01b/F/01 – Audit Plan) • Areas of strength and areas for improvement; • Audit findings; • Conclusions; and • The confidential nature of the contents.
7.1.3	The Audit Report may also include the following, as appropriate and agreed with the Audit Client: <ul style="list-style-type: none"> • Audit limitations (e.g. situations encountered during the audit that may decrease the reliance that can be placed on the audit conclusions; areas not covered, although within the audit scope) • Any unresolved diverging opinions between the Audit Team and the Auditee; • Recommendations for improvement, where the Audit Client has specified in the audit objectives that this is required as part of the audit; • Agreed follow-up action plans, (e.g. follow-up meeting), where specified in the audit objectives; and • Annexes; <ul style="list-style-type: none"> ○ Audit Team Composition and Competence Record Form (Form AAP01a/F/02); ○ Audit Plan (Form AAP01b/F/01); ○ Audit Pro-formas (Form AAP01b/F/02); ○ Non-conformance and Corrective Action Forms (Form AAP04/F/01) ○ Opening and closing meeting minutes

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	<p>Form AAP01d/F/01 can be used to document the Audit Report.</p>
7.1.4	The contents of the report should be easy to understand, concise and unambiguous. It should contain only that information which is supported by relevant audit evidence, and be independent, objective, fair and constructive. The Lead Auditor should consider the report's target audience and that it may be made publicly available under the Environmental Information Regulations or the Freedom of Information Act at some point in the future. The IPT should refer to its Register of Stakeholders (EMP01/F/01 and SMP01/F/02) to identify which stakeholders should receive a copy of the Audit Report.
7.2	Step 2 - Approve and distribute the audit report
7.2.1	Upon completion of the draft Audit Report, the Lead Auditor should forward the report to the Auditee for review and approval. The purpose of this review is to check for factual errors and not to negotiate the report's content. The Lead Auditor should propose a reasonable time by which the comments should be provided. The audit report should be finalised within 2 weeks to 1 month of receiving the comments.
7.2.2	The Lead Auditor should forward a copy of the dated final audit report to the Auditee, Audit Client, ASEG and other agreed recipients.
7.3	Step 3 – Implement corrective/preventive actions
7.3.1	After the final Audit Report has been issued, the Auditee should record non-conformance, observations, and (where specified in the audit objectives) recommended corrective and preventive action using Form AAP04/F/01.
7.3.2	Procedure AAP04 should be used to manage non-conformances and observations, noting the following: <ul style="list-style-type: none"> • The Audit Client and/or Lead Auditor should review the corrective and preventive actions planned by the Auditee to ensure that they appropriately address the non-conformances raised. In the event that these are not considered to be acceptable, the Audit Client will contact the Auditee to agree an acceptable course of action. Should this not be agreed, then the matter may be referred to ASEG for resolution. • The Auditee should keep the Audit Client informed of the status of the progress of corrective and preventive actions.
7.4	Step 4 – Audit follow-up
7.4.1	The completion and effectiveness of corrective and preventive actions for identified non-conformances should be verified. The verification can be completed in a number of ways, for example the follow up could be: <ul style="list-style-type: none"> • part of the current audit; • a separate task; or • integrated within the next appropriate audit.
7.4.2	The results of the verification should be filed with the Audit Report. On completion

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	<p>of the follow-up tasks, the Audit Client will arrange for a copy of the non-conformance close out report to be sent to the Auditee and any other persons to whom the original audit report was sent.</p> <p>7.5 Step 5 – File audit records</p> <p>7.5.1 Documents pertaining to the audit should be retained or destroyed by agreement between the participating parties and in accordance with the management system(s) record procedure(s) and applicable statutory, regulatory and contractual requirements. The IPT should keep audit records within the Safety/Environment Case.</p> <p>7.6 Step 6 – Audit schedule review and update</p> <p>7.6.1 On completion of Step 5 above, the Audit Schedule should be reviewed and where necessary modified.</p>
8	RECORDS AND PROJECT DOCUMENTATION
8.1.1	<p>Where relevant, the outputs from this procedure should feed into the following:</p> <p>Form AAP01a/F/01 - Audit Schedule; AAP02 – Monitoring and Measurement; AAP03 – Management Review; and AAP04 – Non-conformance and Corrective Action.</p> <p>8.1.2 A copy of the information produced by following this procedure should be stored in the Project Safety and Environmental Case(s).</p>
9	RECOMMENDED TOOLS AND FORMS
	<p>Form AAP01d/F/01 - Audit Report Template</p> <p>Form AAP04/F/01 – Non-Conformance and Corrective Action Report Form – fully completed.</p>
10	GUIDANCE
10.1	General
10.1.1	JSP 375, 430, 454, 518, 520, 538, 553 and the SHEF audit manual all include information on auditing. The ISO14000 series is useful, particularly ISO14001 and ISO14004, and also OHSAS 18001, ISO 19011 and ISO9001.
10.1.2	Although audits of Customer 2 are outwith the scope of the system audits, information provided by Customer 2 which relates to SMS and EMS requirements or the safety and environmental performance of the equipment (e.g. objectives and targets and operational controls) should be included in the audit.
10.1.3	If an IPT already has a project management system or procedures (eg ISO 9000) that cover system auditing, then these may be used in place of these POSMS and POEMS

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	procedures so long as ASEG is satisfied that they meet the same objectives.
10.1.4	Further guidance on the application of this procedure can be obtained from ASEG. The Institute of Environmental Management and Assessment (IEMA) and Institution of Occupational Safety and Health (IOSH) are professional bodies in environmental and safety auditing respectively and may produce useful information on auditing. (Further information can be found at http://www.iema.net & http://www.iosh.co.uk).
10.2	Aligning Safety and Environment
10.2.1	The key alignment opportunity in this procedure is to plan safety and environmental audits together, where this is practical and beneficial.
10.3	Guidance for ASEG
10.3.1	In addition to completing sample audits of IPTs' SMS and EMSs, ASEG should ensure that audits are performed that check ASEG's compliance with those procedures that apply directly to it eg SSP01b, SSP02b, SSP03b.
10.4	Warnings and Potential Project Risks
10.4.1	If audits are not completed or are incomplete there is an increased risk that an IPT's SMS or EMS does not achieve its objectives. This may lead to increased safety and environmental risks associated with the project. It may also lead to delays and cost impacts if shortcomings in the SMS and/or EMS are identified late, because rework may be required or approvals may be delayed.

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Form AAP01d/F/01 - Audit Report Template			
IPT:			
Project(s) sampled during audit – title(s)/description			
Audit title and ref			
Audit dates:			
Audit client:			
Audit locations:			
Audit team:			
Completed by:		Date:	
Reviewed by:		Date:	
Audit scope, criteria and objectives:			
Description of approach and methodology:			
Audit findings:			
Areas of strength:			
Areas for improvement:			
Conclusions:			
Additional information:			

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If appropriate and agreed with the Auditee, the following may also be provided	
Audit limitations:	
Any unresolved issues between auditor/auditee	
Recommendations for improvement (if required by Audit client)	
Agreed follow up plans (if specified in the audit objectives)	
Annexes:	Please indicate whether the audit report contains the following annexes – (If not included please indicate why)
Audit team composition form:	
Audit team competency record form:	
Audit plan:	
Audit Pro-formas	
Non-conformance, Observation, Corrective and Preventive action forms	
Opening and closing meeting minutes	

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