



Quality Management System

I approve the following

LEPL Georgian Technical University

Rector / Chancellor _____

___ . ___ . 2022

Internal Audit and Self-inspection

According to the requirements of ISO 9001

MI-03

Rev.: 01

Copy No. ____

LEPL Georgian Technical University

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Table of contents

1	Goal	3
2	Scope	3
3	Definitions	3
4	Responsibilities	4
5	Process	5
5.1	Conducting the Internal Audit	5
5.2	Planning the Internal Audit	5
5.3	Preparation for the Internal Audit	5
5.4	Conducting the Internal Audit	6
5.5	Completion of the Internal Audit and drafting the report. Audit analysis	7
6	Accompanying documents	9
7	Agreement sheet	9
Annex A	Quality Management Internal Audits Program	10
Annex B	Internal Audit Plan form	11
Annex C	Report according to the Internal Audit	12



Goal

This methodological instruction establishes the rules and responsibilities for conducting an Internal Audit of the Quality Management System at the University and analyzing the findings.

2. Scope

The present methodological instruction is mandatory for all structural units of LEPL Georgian Technical University, which are included in the scope of the Organization's Quality Management System (QMS).

Internal Audit is conducted in all structural units within the scope of QMS and covers all QMS processes.

3. Terms and abbreviations applied

The terms and definitions applied in this methodological instruction correspond to the terms and definitions given in the current editions of ISO 9001 Standard.

The following specific abbreviations are used in this methodological instruction:

QMS – Quality Management System

QMS/M – Manual

MI – Methodological Instruction

QMS Manager – The management Representative in the field of Quality;

Mand. – Mandatory

Part. – Participant.



4. Responsibilities

Task	QMS Manager	Rector	Auditor	The head of the structural subdivision to be inspected	QMS Council
Planning the Audit	Mand.	Mand.			
Development of Audit Program for one calendar year	Mand.	Mand.			
Approving Audit Program		Mand.			
Informing structural subdivision regarding the Audit Program	Mand.				
Selecting the Auditors	Mand.	Mand.			
Appointment of Unscheduled Audits, determination of Audit scope and Group of Auditors	Mand.				
Preparation for Audit	Mand.		Mand.		
Conducting the Audit			Mand.	Mand.	
Drafting the Audit report			Mand.		
Appointment of Corrective and Preventive Actions				Mand.	
Conducting Corrective and Preventive Actions	Mand.			Mand.	
Control and analysis of efficiency of the Corrective and Preventive Actions	Mand.				Mand.
Internal Audit Results analysis	Mand.	Part.	Part.		Mand.
Conducting Self-inspection	Mand.			Mand.	

The Organization's Management and employees are obliged to observe the Audit deadlines, to present reliable information to the Auditors and to actively participate in the Audit process.

Auditors are obliged to:

- Have relevant knowledge in the field of Quality Management;
- Have work experience in the Organization;
- Be objective;
- Have the following personal qualities:
 - Diplomacy;
 - Attentiveness;



- Correctness;
- Discernment;
- Ability to make decisions.
- Raise their qualifications and participate in the necessary training.

5. Conducting Internal Audit

5.1 Planning the Internal Audit

Internal Audit and Self-inspection of the QMS is carried out according to the Audit Program pre-approved by the Rector of the Organization. The Audit Program is developed by the Quality Management Leader and includes a list of the processes to be audited, the persons responsible for them and the deadlines for their implementation. The Audit Program includes the control of compliance with the requirements contained in the procedures of the Quality Management System.

The Internal Audit and Self-inspection Program are agreed with the relevant process owners involved in the Audit Process.

An Unscheduled Audit may be conducted as follows:

- When revealing a disputed situation;
- In the case of complaints from the client;
- In case of significant governance and organizational changes;
- When developing a new service/product.

Unscheduled Audits take precedence over the Scheduled Audits.

5.2 Preparation for internal audit

For each Audit, the Lead Auditor establishes an Audit Plan, which includes as follows:

- The goal of inspection, Audit criteria;
- The list of processes subject to inspection and the persons responsible for them;
- The exact date and time of the audit;
- The identity of the performing Internal Auditors.

When drawing up an Audit Plan, consider the documentation requirements of the ISO 9001 standard, QMS and the results of past Audits. The Auditor informs the QMS leader and the owner of the relevant process, or the head of the structural unit, about the date of the Internal Audit. The Audit period can be changed by agreement with all stakeholders.

Auditors are selected by the QMS manager and approved on the basis of the order of the Rector, who have undergone the appropriate training and possess supporting documents (certificates, certificates) approved by the established procedure. Internal Auditors are obliged to act in accordance with the provided Plan, to find the necessary information for analysis and to make objective, fact-based conclusions. Employees are obliged to provide them with accurate information.

Self-inspection is carried out by means of a checklist drafted in advance by the QMS Leader.

5.3 Conducting the Internal Audit



The Audit is conducted according to the Internal Audit Plan as follows:

- Introductory interview;
- Interviews with relevant employees of the given structural unit;
- Review of QMS documents related to the current processes in the relevant structural unit;
- Selective control of the implementation of measures established according to the QMS;
- Discussion of results / final interview.

On the day of the Audit, the Internal Auditor organizes a meeting with the employees of the structural unit to be audited and explains to them the goal of the Audit and the methods of conducting it (survey, document check, tour, analysis of previous Audit Results, etc.).

During the Audit, the results of observations are registered by each Auditor independently in the checklist, and the discovered non-conformity is reported to the head of the structural unit or the owner of the relevant process.

Each audit checklist is developed by the Lead Auditor. It is possible to ask questions that are not included in the checklist. Auditors record all information that indicates possible non-conformance and on the basis of which improvement measures can be taken.

According to the comments made during the specific Audit Process, the owner of the inspected process or the head of the structural unit must implement a correction, corrective or preventive action.

If the Audit lasts for several days, the head of the audited structural unit or the owner of the relevant process, at the end of each working day, will be notified regarding the interim results.

If the target cannot be achieved, the Audit is stopped, the QMS Manager gathers the Auditors and investigates the situation.

5.4 Completion of the Internal Audit and drafting the report, audit analysis

Upon the completion of the Audit, the QMS Manager holds a summary meeting with the head of the inspected structural unit and the owner of the relevant process regarding the review of the inspection results and the conclusions made. At the mentioned meeting, the Auditors exchange information, discuss the results, and prepare an Audit Report reflecting positive aspects, potential for improvement of activities, non-conformities and the existence of their supporting facts.

The Audit Report is drafted in a written form by the Lead Auditor, who is responsible for the accuracy and completeness of the Report. It is possible to attach supporting materials, statistical data, acts and others to the report as an appendix. The appendix is attached to the first copy of the report and is kept with the QMS Manager.

Evaluation of Audit Results is carried out using the following terminology:

Deviation:	must be eliminated according to the prescribed period. Requires taking measures.
Potential for improvement:	Presents an opportunity to improve the QMS. Feasibility analysis.
Positive note:	Highlighting the positive aspects of QMS implementation.



QMS
Internal Audit

MI-03
Amendment ___/___
p. 7 / 11

The conducted Internal Audit Report is submitted to the Rector of the Organization, the QMS Leader, the head of the inspected structural unit or the owner of the relevant process. The QMS Leader oversees the implementation of the correction.

If the head of the inspected structural unit or the owner of the relevant process does not agree with the Audit Results, the final decision is made by the QMS Leader and, if necessary, a re-inspection is carried out.

According to the Results of the conducted Audit, the head of the inspected structural unit, or the owner of the relevant process, plans the actions for the implementation of Corrective and Preventive Actions in accordance with the Corrective and Preventive Actions Procedure.

The head of the inspected structural unit, or the owner of the relevant process, determines the measures to avoid the cause of the non-conformity, or the non-conformities, which were not corrected during the correction.

The deadlines for the Corrective and Preventive Actions are set by the head of the inspected structural unit or the owner of the relevant process.

After Corrective and Preventive Actions are ensured, information for control is provided to the Quality Management Leader.

The results of the conducted Internal Audit are analyzed at the QMS Board meeting.

Records relevant to internal audit are retained by the QMS Manager for the period specified in the records list.



QMS
Internal Audit

MI-03
Amendment ___/___
p. 8 / 11

Accompanying documents

Identification	Title
QMS/M	Manual
ISO 19011	Manual references to the Management System Audit
MI-05	Non-conformities management
MI-04	Correction and Corrective Actions

Agreement sheet

Developer:	Date	Signature
QMS Leader		
Agreed:		
Rector		



**QMS
Internal Audit**

MI-03
Amendment ___/___
p. 9 / 11

Annex A

F-MI-03A-01

Annual Program for the QMS Internal Audits for LEPL Georgian Technical University

----- (year)

#	Process	Art.	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Resources

Unscheduled Audits

#	Process	Reason	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec

Drafted by:

QMS Manager: _____

Signature

Surname/name

Date:

Approved by:

Rector: _____

Signature

Surname/name

Date:



QMS
Internal Audit

MI-03
Amendment ___/___
p. 10 / 11

Annex B
(Mandatory)

Internal Audit Plan form

Customer	
Executor	
Time to complete the work	
Scope	
Audit goal	
Audit type	<input type="checkbox"/> Planned <input type="checkbox"/> Unscheduled

Date	Time	Audit criteria	Process / subprocess	Work evidence / document
			D Approved by: /-----/	Agreement of Audit working plan

Lead Auditor:

Auditor:

Head of the structural unit to be inspected:

Name, surname

Signature

Date



QMS
Internal Audit

MI-03
Amendment ___/___
p. 11 / 11

Annex C
(Mandatory)

Report according to the Internal Audit

Process/subprocess:	
Structural Unit:	Auditors
Audit Date:	Audit type: <input type="checkbox"/> Planned <input type="checkbox"/> Unscheduled
Audit goal:	

Audit results:

Deviation / Improvement	Standard clause	Non-conformities revealed through the Audit

Lead Auditor: _____ Date _____ 22

Auditor: _____ Date _____ 22