



1.0 PURPOSE:

- 1.1 To establish, document, implement and maintain a procedure for the PSC's Internal Quality Audit (IQA) process.
- 1.2 To define the procedure for the, preparation, implementation, follow-up, and reporting of IQA activities in determining whether:
 - 1.2.1 The PSC QMS conforms to applicable requirements/planned arrangements; and,
 - 1.2.2 The QMS is effectively implemented, maintained and improved.

2.0 SCOPE:

- 2.1 This procedure applies to the PSC's quality management system whose processes directly affect the quality of products and services delivered to its clients/customers.

3.0 DEFINITION OF TERMS:

- 3.1 **Audit**- Systematic, independent, and documented process for obtaining evidence and evaluating it objectively, to determine the extent to which criteria are fulfilled.
- 3.2 **Audit Criteria**- Set of policies, procedures, or requirements, used as reference against which audit evidence is compared
- 3.3 **Audit Evidence**- Records, statements of facts or other information, which are verifiable and relevant to the audit criteria. It can be qualitative or quantitative
- 3.4 **Audit Findings**- Results of the evaluation of the collected audit evidence against audit criteria
- 3.5 **NC**- Nonconformity, Non-fulfillment of requirement
- 3.6 **Disposition**- Actions to be taken to address nonconformities
- 3.7 **Corrective Action** - Actions to be taken to prevent occurrence of an identified NC.
- 3.8 **RFA Form** - Request for Action form
- 3.9 **OFI**- Opportunity for Improvement; Statement of fact or condition that does not signify a failure in the system but may be enhanced

4.0 PROCEDURE DETAILS:

4.1 Responsibilities

- 4.1.1 The IQA Team Leader is responsible for ensuring that a complete audit on the quality management system takes place at least twice a year (i.e., all processes of the QMS must be audited at twice in a year).