

Environmental Management System and Regulatory Compliance Audits

1.0 Purpose/Scope

This procedure defines the mechanism for the planning and implementation of internal environmental management system and regulatory compliance audits at the *Facility/Plant Name*.

2.0 Activities Affected

All areas and departments

3.0 Forms Used

- 3.1 Audit Checklist
- 3.2 Corrective and Preventive Action Request (CAR)
- 3.3 Internal Environmental Audit Summary Report
- 3.4 Audit Schedule

4.0 References

- 4.1 EP-004 Non-conformance and Corrective and Preventive Action
- 4.2 EP-005 Environmental Management System Management Review
- 4.3 ISO 14001:1996, Elements 4.5.1 and 4.5.4
- 4.4 Compliance Assurance Program Guideline

5.0 Definitions

- 5.1 Auditee: individual audited.
- 5.2 Auditor: audit team member performing the audit.
- 5.3 Audit Criteria: policies, practices, procedures or other requirements against which the auditor compares objective evidence about the subject matter.
- 5.4 Audit Program Leader: individual responsible for maintaining the Environmental Audit Program.
- 5.5 CAR: corrective and preventative action request that identifies observed non-conformances.
- 5.6 Finding: an existing condition supported by objective evidence.
- 5.7 Non-conformance: the non-fulfillment of specified system requirements.
- 5.8 Objective Evidence: qualitative or quantitative information, records, or statements of fact pertaining to the existence and implementation of an EMS element which is based on measurement or test and which can be verified.

6.0 Exclusions

None

7.0 Procedure

- 7.1 Conducting the Internal EMS Audit
 - 7.1.1 The Quality Manager or designee shall plan, schedule and implement internal environmental management system audits. The audit schedule will be used to identify the frequency and location of internal environmental management system audits and will be

revised as necessary. Revisions to the audit schedule may be based on the results of prior audits.

- 7.1.2 Audit frequency will be established on a priority basis, taking into account previous audit results and the relative importance of the area or department, and will not be less than once per year for each location. Each area or department will be audited at least once every three years on all system elements.
- 7.1.3 For each area or department within the facility, an audit team will be formed whose membership has no responsibility within the area or department to be audited. This independence will be documented by indicating on the audit report or other audit record the organization to which the auditors belong.
- 7.1.4 Competent audit teams shall perform internal environmental audits.
 - 7.1.4.1 At least one member of the team shall be competent in the environmental auditing process through either training and/or experience.
 - 7.1.4.2 All members of the audit team shall have an awareness and understanding of the *Facility/Plant Name's* environmental management system by virtue of formal and informal training.
- 7.1.5 Audit scope and criteria will be established for each area or department prior to each audit. Audit criteria may be documented by the audit team in an Audit Checklist and the checklist used during the audits.
- 7.1.6 During the audit, the audit team will record audit information, such as: items checked, individuals interviewed, any concerns identified and any corrective or preventative actions completed during the audit. The audit team shall promptly notify the Environmental Management Representative or designee of any possible regulatory non-compliance. Upon verification of non-compliance, the Environmental Management Representative shall notify facility management.
- 7.1.7 Upon completion of the internal audit, the audit team will review their findings with the auditee and responsible and accountable area or department representative. The team will then initiate a CAR for each finding of non-conformance (Note: a non-compliance is a non-conformance) using the Corrective Action Request form.
- 7.1.8 The Quality Manager or designee will track the status of all outstanding CAR's using the Internal Environmental Audit Summary Report form (see also EP-004).
- 7.1.9 The responsible and accountable area or department representative is to identify the root cause of the non-conformance (where applicable), corrective and preventative actions to be undertaken, and the dates by which these actions will be completed. This information will be documented on the original CAR and the CAR sent to the applicable area or department manager. A copy of the CAR will also be provided to the Quality Manager or designee within the time frame established during the audit review meeting.
- 7.1.10 Upon completion of the corrective and preventative actions, the area or department manager will acknowledge completion of these actions by signing the original CAR and returning it to the Quality Manager or designee.

- 7.1.11 Corrective and preventative actions will be verified during the next internal audit or the area or department manager may contact the Quality Manager to schedule verification of actions prior to the next audit.
 - 7.1.12 When full conformance is determined or corrective and preventative actions accepted, the audit team leader will sign the original CAR and return it to the Quality Manager or designee for closure and filing.
 - 7.1.13 At least annually, the Environmental Management Representative or designee will summarize system audit results with facility management as specified in EP-005.
- 7.2 Conducting the Compliance Assessment Audit
- 7.2.1 The EMR or designee is responsible for planning, scheduling and implementing internal environmental regulatory compliance assessment audits, including the identification of required resources.
 - 7.2.2 The EMR or designee develops and maintains the environmental compliance assurance program and issues program support documents, based on company environmental compliance assurance guidelines, where available.
 - 7.2.3 During a compliance assessment audit, assessment team members will record information, such as: items checked, individuals interviewed, any possible regulatory non-compliance issues. The assessment team shall promptly notify the Environmental Management Representative or designee of any possible regulatory non-compliance. Upon verification of non-compliance, the Environmental Management Representative shall notify facility management.
 - 7.2.4 The assessment team reviews possible regulatory non-compliance issues with the responsible and accountable area or department representative. The team also prepares a CAR identifying the issues, corrective and preventative actions required, and the individuals responsible for completing the actions. The EMR or designee and area or department manager will concur with the CAR before its issuance.
 - 7.2.5 Upon completion of the corrective and preventative actions, the area or department manager will acknowledge completion of these actions by signing the original CAR and returning it to the EMR or designee.
 - 7.2.6 Corrective and preventative actions will be verified in a timely manner by a member of the assessment team. When full compliance is determined or corrective and preventative actions accepted, the assessment team member will sign the original CAR and return it to the EMR or designee for closure and filing.
 - 7.2.7 Each calendar quarter, the EMR or designee will present a summary of open CAR's that are based on regulatory non-compliance to facility management for review.

8.0 General Rules

- 8.1 Records, including CAR's, relating to potential or actual non-compliance issues will be treated as confidential and will be kept separate from those relating to internal EMS audits.
- 8.2 Potential non-conformance issues (Note: a non-compliance is a non-conformance) must receive prompt attention and timely corrective and preventative action.
- 8.3 All audit records shall be marked "Environmental Audit Report: Privileged Document" (US only) and distributed to individuals with a need to know their contents in order to assess, respond to or remedy a potential or actual non-conformance.

9.0 Records

Records shall be retained consistent with EP-013.

Record of Revisions

Revision Date	Description	Sections Affected