

Internal Audit Procedure

Issue 3, Revision 0

Approved by BCA

Committee on Conduct of Conformity Assessment Activities on November 2, 2015

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1 SCOPE

- 1.1** The scope of the Internal Audit Procedure is to implement the ASME Accreditation and Certification Internal Audit program as established by the Committee on Conduct of Conformity Assessment Activities (C3A2) and authorized by the Board on Conformity Assessment (BCA). The internal audit activities are administered and coordinated through the C3A2.
- 1.2** This procedure defines and sets forth requirements for the Internal Audit Team (IAT) to perform internal audits of ASME Accreditation and Certification programs.

2 OBJECTIVES

- 2.1** The objectives of the internal audit are to:
- (a) determine by investigation, examination, or evaluation of objective evidence the adequacy of ASME Conformity Assessment programs and compliance with established procedures;
 - (b) observe areas most important to the performance of the Conformity Assessment program and then evaluate the area to improve its performance, based on the following characteristics:
 - (1) procedural due process, i.e., an established course of action to ensure the rights of individuals or organizations who participate in and who are affected by the Conformity Assessment program;
 - (2) effectiveness, i.e., a factor of the program's conformity assessment of an Applicant's demonstrated compliance with a Code or Standard;
 - (3) reliability, i.e., a factor of the consistency and repeatability of a program's conformity assessment.
- 2.2** The internal audits of ASME's Conformity Assessment programs shall be conducted in a manner that stresses the evaluation of those activities that affect the program's ability to maintain its credibility and integrity; and perform the Society's intended purpose, as follows:
- (a) protect the ASME mark;
 - (b) bear evidence that ASME has accepted an organization's or individual's demonstrated conformance with a Code or Standard related to
 - (1) public safety and health;
 - (2) protection and preservation of the environment; and
 - (3) a quality management system.

3 SCHEDULING

- 3.1** Selected activities in each area of the Conformity Assessment program shall be audited at intervals recommended by the Director Auditing and Inspection (DAI), through the annual management review process of all accreditation and certification programs and the audit schedule shall be approved by C3A2. Additional internal audits may be performed or the intervals adjusted as directed or agreed to by C3A2.
- 3.2** The DAI shall coordinate with the ASME staff to select the appropriate activities to be audited in accordance with the schedule.
- 3.3** For internal audits of Joint Reviews and Surveys of Certificate Holders the ASME staff shall inform the Applicant/Certificate holder that the IAT plans to perform an internal audit and shall obtain their concurrence for access by the IAT. At least one Joint Review and one Nuclear Survey shall be conducted annually unless otherwise directed by C3A2.
- 3.4** For internal audits of Accreditation or Certification Committees or Subcommittees, the ASME staff shall notify the Committee or Subcommittee Chair of selected dates for observation or internal audit by the IAT. If one or more hearings are scheduled to be held at the selected meeting, ASME staff shall contact the Applicant(s)/Certificate Holder(s) for concurrence for access by the IAT. These type of audits shall be conducted at least every three years unless otherwise directed by C3A2.
- 3.5** For internal audits of the ASME Conformity Assessment Department the ASME staff shall assure that key personnel from the audited organizations will be available on the selected dates. For internal audits of ASME Designated Organizations, the ASME staff will contact the audited organization to arrange access for the IAT. These type of audits shall be conducted at least every three years unless otherwise directed by C3A2.
- 3.6** The ASME staff shall provide confirmation to all parties concerned regarding internal audit dates, purpose of internal audit and IAT Members.
- 3.7** The C3A2 shall approve a five year plan for scheduling internal audits based upon a proposal from the DAI. The schedule shall be reviewed at least annually by the C3A2 and updated as required.

4 RESPONSIBILITIES

4.1 SECRETARY, C3A2 AND ASME STAFF

Under the direction and guidance provided by the BCA and C3A2, the Secretary, C3A2 and ASME staff shall be responsible for the following:

- (a) providing the DAI with a designated contact for all audits;
- (b) scheduling all audits, informing all concerned parties, and requesting necessary concurrence for access by the IAT;
- (c) maintaining a list of C3A2 approved Internal Auditors and Internal Audit Team Leaders.

4.2 DIRECTOR AUDITING AND INSPECTION (DAI)

Under the guidance provided by the C3A2, the DAI shall be responsible for the following:

- (a) proposing internal audit schedules;
- (b) ensuring the qualifications of Internal Auditors are in accordance with Appendix A or ASME Procedure “*Standard Qualification Criteria For Designees for Accreditation And Product Certification Activities*”;
- (c) evaluating and minimizing any Conflict of Interest between the IAT and the auditee;
- (d) indoctrinating and training Internal Auditors to established audit procedures;
- (e) submitting and maintaining a list of qualified IAT members to the C3A2;
- (f) appointing an IAT being guided by the scope of the audit in determining the size and composition of the Team;
- (g) evaluating and notifying C3A2 on requalification of Internal Auditors and IAT Leaders;
- (h) preparing or arranging to be prepared written audit plans;
- (I) reviewing Internal Audit Reports submitted by IAT Leaders for completeness, compliance with the IAT procedures, and following the internal audit plan;
- (J) transmitting Internal Audit Reports to the C3A2 Committee, with a copy to the C3A2 Secretary;
- (k) establishing and maintaining a system for tracking the resolution status of deviations and observations.

4.3 INTERNAL AUDIT TEAM LEADER

Under the direction and guidance provided by the DAI, the IAT Leader shall be responsible for the following:

- (a) reviewing and editing internal audit plans and checklists;
- (b) while performing an internal audit, officially representing ASME Conformity Assessment and IAT in all matters;
- (c) directing the activities of IAT Members, including Team assignments;
- (d) conducting pre and post audit meetings with representatives of the organizations or programs being audited;
- (e) conducting any interim briefings with the audited party if required by the nature of the audit subject(s);
- (f) preparing the Internal Audit Report reflecting the consensus of the Team and submitting the report to the DAI
- (g) for audits of surveys or reviews, preparing a Supplementary Report, if necessary, upon receipt of the ASME Review or Survey Report and submitting the Supplementary Report to the Director, Auditing and Inspection.

4.4 INTERNAL AUDIT TEAM MEMBERS

Under the direction and guidance of the IAT Leader, IAT Members shall be responsible for the following:

- (a) auditing assigned areas in accordance with the audit plan and the audit checklist;
- (b) submitting written deviations and/or observations to the IAT Leader;
- (c) participating in the pre and post audit meetings to discuss deviations and/or observations;
- (d) participating in any interim briefings with the audited party;
- (e) indicating agreement or disagreement with decisions of the IAT. IAT Members who do not agree with the decisions of the majority of the Team may file a Minority Report.

5 INTERNAL AUDIT PLANNING

- 5.1** The DAI shall appoint an IAT for each scheduled audit. The IAT shall consist of a team leader, and if necessary, one or more team members [4.2(e)]. IAT team leaders and team members shall not be assigned, for a minimum of two years, on any audit for which they had previous responsibilities with the audited organization.
- 5.2** The DAI shall prepare or arrange to be prepared an audit plan and audit checklist for each audit to be conducted. The internal audit plan shall identify, as a minimum, the following information:
- (a) location and dates of start and conclusion of the audit;
 - (b) name and title of the designated contact of the program or element to be audited;
 - (c) type, scope, and purpose of audit;
 - (d) applicable standards(s), guide(s), and appropriate check-sheets;
 - (e) a written audit protocol describing how the audit will be conducted;
 - (f) IAT Members.
- 5.3** The audit plan should be flexible to permit changes based on information gathered during the conduct of the internal audit, and to permit the effective use of resources.
- 5.4** Checklists shall be used to facilitate the Team's investigation, examination, documentation, and reporting of objective evidence, deviations and observations. Checklists shall document the following:
- (a) the name and title of the person contacted for each element examined;
 - (b) the initials of the IAT Member performing the examination;
 - (c) the procedure or work instruction and revision documenting the activity;
 - (d) the objective evidence reviewed in connection with the examination;
 - (e) the IAT Members' observations concerning the adequacy of the element's implementation in accordance with the manual, procedures, or work instructions specified;
 - (f) the IAT Members' recommendations, if any, for improving the accreditation or certification program's performance by improving the program's procedural due process, effectiveness, or reliability;
 - (g) review of any previous internal audit deviations or observations.

6 INTERNAL AUDIT PROCESS

6.1 PRE-AUDIT PREPARATIONS

- (a) The IAT Leader shall provide members of the IAT with copies of the internal audit plan, checklist and other procedures or documentation relative to the audit;
- (b) The IAT Leader shall contact the ASME staff to ensure all arrangements are in place and appropriate personnel and documents, including the report of the previous audit, if any, are available for the audit process;
- (c) Prior to the start of the internal audit, the Team shall meet to review the audit plan, checklist and other related documents.

6.2 OPENING MEETING

An opening meeting shall be held by the IAT with the designated contact of the auditee and appropriate key personnel. The IAT Leader shall

- (a) record the attendance;
- (b) introduce the IAT Members;
- (c) discuss the scope and purpose of the internal audit;
- (d) describe the audit process, the audit protocol and the documentation of the audit results;
- (e) establish the interfaces for performing the internal audit;
- (f) review how deviations and observations will be handled and the corrective action request and response process;
- (g) clarify any points not understood and answer questions concerning the audit process;
- (h) confirm the time and date for the exit meeting and any interim meeting to review the Team's observations.

6.3 CONDUCT OF INTERNAL AUDIT

6.3.1 The internal audit involves

- (a) an in depth appraisal of elements of the implemented program, operating procedures, and work instructions for conformance to the relevant program requirements; and
- (b) observation, analysis, and evaluation of selected elements of the audited activity based on improving performance.

- 6.3.2** Objective evidence shall be collected by the Team through interviews, examinations of documents, and observations of activities and conditions in areas of concern identified by the IAT. Apparent deviations shall be documented and investigated, whether they are covered by the checklist or not.
- 6.3.3** Information gathered by interviews shall be verified using objective evidence from other sources, such as physical observation and records.
- 6.3.4** The IAT Leader may make changes in the IAT Member assignments during the audit to achieve the optimum internal audit objectives.
- 6.3.5** IAT Members and the IAT Leader shall document the following information on the checklist:
- (a) procedure number or work instruction number and revision;
 - (b) the objective evidence reviewed including number of total documents or records available and number reviewed, or the number of observations made per item;
 - (c) observations of the adequacy of implementation of each element or sub element examined;
 - (d) apparent deviations and observations noted during the examination;
 - (e) the current status of deviations recorded during previous internal audits
 - (f) any recommendations for improving the accreditation or certification program .
- 6.3.6** While performing audits of surveys or reviews, IAT members shall:
- (a) be under direct control and supervision of the IAT Leader;
 - (b) communicate only with the IAT Leader on matters relative to the internal audit, except as specified in 6.3.10;
 - (c) not directly participate in any function of a survey or review;
 - (d) not communicate with the Applicant/Certificate Holder except through the ASME Survey or Review Team Leader;
 - (e) hold all information relative to survey or review findings, observations, recommendations, discussions, reports, and Applicant's/Certificate Holder's operation as confidential.
- 6.3.7** The conduct of internal audits of Surveys or Joint Reviews shall in no way, nor at any time during the internal audit, be performed in a manner that can be construed as a parallel survey or review of the Applicant/Certificate Holder.

6.3.8 For internal audits of Surveys or Reviews, the IAT shall observe and evaluate the conduct of all aspects of the survey or review. The primary elements to be evaluated by the IAT are as follows:

- (a) Quality Manual review by the Survey or Joint Review Team;
- (b) conduct of the entrance meeting with the Applicant/Certificate Holder;
- (c) manual review by the Survey or Review Team with the Applicant/Certificate Holder;
- (d) review by the Survey or Review Team of the Applicant's/Certificate Holder's implementation of the manual;
- (e) manual revision verification and acceptance by the Survey or Review Team
- (f) conduct of the exit meeting with the Applicant/Certificate Holder;
- (g) report of findings and proposed recommendation relative to issuance or renewal of Certificate by the Survey or Review Team to the Applicant/ Certificate Holder and resolution of questions raised on findings.

6.3.9 The IAT shall observe the activities of the Survey or Review Team to ensure conformance to the Survey or Joint Review Team's established checklist requirements and any other established procedures. This shall be done by identifying the documents and the type of information that was evaluated by the Survey or Review Team. Members of the IAT shall not oversee the Survey or Review Team Member's evaluation of a specific element to the level of detail necessary to confirm the technical adequacy of the element.

6.3.10 After the Survey or Joint Review Team's checklists have been completed, the IAT Members may interview the Survey or Review Team Members to determine the basis for completing the checklists. Such interviews shall be conducted in private areas away from any representatives of the Applicant/Certificate Holder.

6.3.11 The IAT Members shall determine whether the observed activities and the results of the interviews establish reasonable assurance that the checklist requirements and other established procedures were met.

6.3.12 The IAT shall also conduct a performance-based assessment of selected areas of the Survey or Joint Review Team's activities. The IAT Leader shall select the areas to be assessed, based upon:

- (a) the Applicant's/Certificate Holder's scope of accreditation or certification;
- (b) the expertise of the IAT Members; and
- (c) consultation with the Survey or Review Team Leader.

- 6.3.13** The IAT shall observe the selected areas of the Survey or Review Team's activities as to how they affect the procedural due process, effectiveness, and reliability of the conformity assessment program and then perform an analysis and evaluation of these elements based on improving performance of the program. The results of this analysis and evaluation, if any, shall be included in the Internal Audit Report as observations, along with corresponding recommendations that will improve the program's performance through changes in the program's procedural due process, effectiveness, or reliability.
- 6.3.14** For internal audits of Accreditation or Certification Committees or Subcommittees, the IAT shall attend a meeting of the Committee or Subcommittee and observe its activities as detailed in the meeting agenda and any associated handout material. The primary elements to be evaluated by the IAT are as follows:
- (a) compliance with approved and documented procedures;
 - (b) adherence to confidentiality requirements;
 - (c) consideration and resolution of potential conflicts of interest;
 - (d) due process provided to all concerned parties;
 - (e) thoroughness and objectivity in consideration of agenda items;
 - (f) consistency in Committee or Subcommittee actions for similar items;
 - (g) completeness of actions;
 - (h) continued consideration and resolution of open items.
- 6.3.15** Any questions or requests for clarification from the IAT shall be presented by the IAT Leader to the designated auditee contact during breaks in the Committee or Subcommittee meeting.
- 6.3.16** For internal audits of the ASME Conformity Assessment Department and ASME Designated Organizations, the IAT shall review applicable charters, procedures, and agreements between ASME and its Designated Organizations. During the internal audit, emphasis should be placed upon the following:
- (a) adequacy of procedures, forms, and other written directions;
 - (b) adequacy of implementation of procedures and other written directions;
 - (c) timeliness and effectiveness of operations;
 - (d) maintaining confidentiality of actions and records where required;
 - (e) protection of the integrity of the ASME Conformity Assessment programs;
 - (f) due process provided to all concerned parties;
 - (g) objectivity in conducting all operations;
 - (h) follow-up on open items.

6.3.17 Deviations and observations shall be documented. After activities are completed each day and at the end of the internal audit, the Team shall meet in closed session to determine which items should be reported as deviations and which shall be reported as observations. Deviations shall be clearly and concisely documented, supported by objective evidence, and identified in terms of the specific requirements of the appropriate documentation against which the internal audit was conducted.

6.4 DAILY BRIEFING

- (a) The IAT Leader shall arrange a daily briefing between the Team Members and the key individuals who were involved in the internal audit.
- (b) The IAT will review the elements examined during the day to ensure that the facts associated with any deviation or observation are understood and acknowledged by the auditee and any questions raised during the audit process are resolved. An Internal Audit Deviation/Observation form shall be used for this purpose (Appendix B).

6.5 CLOSED TEAM MEETING

- (a) A final IAT meeting shall be held prior to the exit meeting for the purpose of reviewing and consolidating the deviations and recommendations for presentation to the auditee and for preparation of the final Internal Audit Report.
- (b) The IAT Leader shall assure that the final deviations and observations have been clearly and concisely documented on Internal Audit Deviation/Observation forms identifying the internal audit, reflect the consensus of the Team, and the IAT Leader has signed and dated each Internal Audit Deviation/Observation form signifying review and concurrence with the deviation or observation.
- (c) The IAT Leader shall collect all IAT Members' checklists and other internal audit related documents and assure that they have been completed, signed, and dated.
- (d) The IAT Leader shall ensure the final Report encompasses the internal audit subjects, remains within the scope of the internal audit, and reflects the consensus of the IAT.

6.6 EXIT MEETING

After the audited party has completed all of the activities to be observed and evaluated by the IAT, the IAT shall hold an exit meeting with the key personnel of the audited activity. The IAT Leader shall:

- (a) present deviations and observations identified by the IAT;
- (b) recognize any corrective action taken by the auditee during the internal audit;
- (c) respond to any questions regarding the conduct of the internal audit or the deviations/observations reported by the IAT. Unresolved issues shall be made a part of the documentation submitted to the C3A2;
- (d) advise as to the preparation and distribution of the Internal Audit Report, including corrective action requests;
- (e) obtain from the designated auditee contact acknowledgement of the deviations and observations noted.
- (f) advise the designated auditee that responses to deviations must be submitted to the IAT Leader within thirty days from the completion of the internal audit.

7 DEVIATIONS AND OBSERVATIONS

7.1 DEFINITIONS

- (a) A Deviation is a departure from a specified requirement.
- (b) An Observation is the identification of a specific concern that affects the program's procedural due process, effectiveness, or reliability and includes a recommendation that achieves improved performance.

7.2 DEVIATIONS

7.2.1 Where applicable, deviations noted during previous internal audits shall be reviewed during the audit process to ensure adequate closure. The status of the action(s) taken shall be documented as part of the current Internal Audit Report.

7.2.2 Deviations identified shall be reviewed with the responsible audited party to ensure understanding of the evidence or facts surrounding the deviation and submitted as part of the Internal Audit Report.

7.2.3 Deviations shall be documented even if the auditee has taken corrective action prior to the completion of the internal audit. The Internal Audit Deviation/Observation form shall be appropriately annotated.

7.3 OBSERVATIONS

7.3.1 Observations identified shall be reviewed with the responsible audited party to ensure understanding of the evidence or facts surrounding the observations and submitted as part of the Internal Audit Report.

8 INTERNAL AUDIT REPORTS

- 8.1** The IAT Leader shall prepare a written Report at the conclusion of the internal audit. The Internal Audit Report should reflect the performance-based aspects of the internal audit and communicate deviations and observations. The Internal Audit Report shall contain the following information:
- (a) location, date(s) and type of audit; (see 8.4)
 - (b) IAT Members and others in attendance;
 - (c) summary of areas, activities, and elements that were observed and evaluated;
 - (d) the agreed upon audit plan;
 - (e) deviations and observations;
 - (f) performance-based reasons for each deviation or observation;
 - (g) status of deviations or observations, documented as open or closed by IAT Leader
 - (h) status of previous deviations and open items, if applicable;
 - (i) procedural due process, effectiveness, and reliability of the program.
- 8.2** Internal Audit Reports shall be sequentially numbered, preceded by the year in which the internal audit was conducted, e.g., 10-01, 10-02, 10-03, etc. All correspondence, letter ballots, or other references to an internal audit shall use the assigned audit number.
- 8.3** Internal Audit Reports shall first describe each of the deviations, , identified sequentially with a unique number that starts with the audit number, e.g., Deviation 10-01-D01, Deviation 10-01-D02, Deviation 10-01-D03, etc. Observations shall follow deviations identified sequentially with a unique number that starts with the audit number, e.g., Observation 10-01-01, Observation 10-01-02, Observation 10-01-03, etc.
- 8.4** Internal Audit Reports shall not contain the names of Applicants, Certificate Holders or Authorized Inspection Agencies.
- 8.5** IAT Members who do not agree with the decisions of the Team may file a Minority Report. Minority Reports shall define the area of disagreement. The Minority Report shall be filed at the time of and as a part of the final Internal Audit Report.
- 8.6** The IAT Leader shall submit Internal Audit Reports including responses from the auditee / organization to the DAI for review within forty five calendar days after the completion of the internal audit.
- 8.7** The DAI after review of Internal Audit Report for completeness shall forward the report to the C3A2 Committee with a copy to the C3A2 secretary for concurrence and recommended actions for process improvement of the audited program. C3A2 will release internal audit report to audited organization.

- 8.8** If a deviation remains open and an acceptable response is not received after repeated attempts, the C3A2 shall, after a majority vote, advise BCA of the situation.
- 8.9** For internal audits of surveys or reviews, the Internal Audit Team Leader will be provided with the ASME Review or Survey Report. The IAT Leader may prepare a Supplementary Report based on the contents of the ASME Review or Survey Report and submit the Supplementary Report as part of the internal audit report.

9 CONFIDENTIALITY

- 9.1** All discussions held by the IAT in the process of arriving at a consensus with regard to deviations and observations shall be held confidential within the IAT and the C3A2.
- 9.2** All IAT members and IAT observers shall have on file with the DAI a signed Certificate of Confidentiality prior to participation in internal audit activities.
- 9.3** During the internal audit, official communication with the organization being audited is the responsibility of the IAT Leader. Only the IAT Leader shall convey the results of the internal audit.

10 DOCUMENT RETENTION

The IAT Leader shall retain all IAT Members' checklists, notes, and other internal audit related documents until the C3A2 has released the Internal Audit Report to the audited organization. The Internal Audit Report shall be kept on file until the next audit of the same organization is performed and closed out.

11 REVISIONS

Revisions to these procedures are subject to approval by the C3A2.

APPENDIX A, QUALIFICATION & MAINTENANCE CRITERIA FOR INTERNAL AUDITORS

A.1 SCOPE

A.1.1 This procedure details the requirements for training and qualification of IAT Leaders and IAT Members.

A.1.2 The qualification requirements for previously qualified IAT Leaders and Internal Auditors are waived but all other requirements of this procedure apply.

A.2 PERSONNEL SELECTION

A.2.1 The DAI is an ASME staff held position working under the direction of the Managing Director, Conformity Assessment and Publishing.

A.2.2 INTERNAL AUDIT TEAM LEADER

Shall be designated in writing by the DAI and shall have education, experience and training commensurate with the scope, complexity or special nature of the activity to be audited. The IAT Leader shall also possess communicative skills, both written and oral and be qualified as an IAT Leader in accordance with this appendix or the Criteria Document.

A.2.3 INTERNAL AUDITORS

Shall be designated in writing by the DAI based on their qualification as an Internal Auditor in accordance with this appendix.

A.3 INDOCTRINATION AND TRAINING

A.3.1 Prospective IAT Leaders and Internal Auditors shall have their need for training evaluated by the DAI. The evaluation of training need shall include the following factors:

- (a) Knowledge of the general structure of ASME Conformity Assessment programs,
- (b) Auditing techniques,
- (c) Audit planning,
- (d) Audit reporting and follow-up.

A.3.2 When it is determined that the individual needs training, the individual, as a minimum, shall be given on-the-job training by participating as a trainee on at least one audit in addition to that required by A.4.1 or A.4.2.

A.3.3 The on-the-job training shall cover auditing skills, auditing techniques, methods for identifying and following-up on corrective action.

A.4 REQUIREMENTS FOR QUALIFICATION

A.4.1 INTERNAL AUDITOR

In addition to having completed any training required by the DAI per A.3.3, the candidate for Internal Auditor shall have verifiable evidence of education and experience by achieving a minimum of four credits under the credit system described in A.4.3.

A.4.2 INTERNAL AUDIT TEAM LEADER

In addition to having completed any training required by the DAI per A.3, the candidate for IAT Leader shall have;

A.4.2.1 Participated in a minimum of two audits as an Internal Auditor and one audit as an IAT Leader under the guidance of a qualified Internal Audit Team Leader. Participation in the audits is to have been completed within a period of time not to exceed three years prior to the date of qualification, one of which shall be within the year prior to qualification.

A.4.2.2 Verifiable evidence of education and experience by achieving a minimum of ten credits under the credit system described in A.4.3.

A.4.3 QUALIFICATION CREDITS

The candidate for Internal Auditor shall achieve a minimum of four credits and for IAT Leader a minimum of ten credits as evaluated on the Record of ASME Auditor Qualification Form A.1 based on the following criteria.

A.4.3.1 Education (Four Credits Maximum)

- (a) Associate degree from an accredited institution: score one credit or, if the degree is in engineering, physical sciences, mathematics, or quality assurance, score two credits; or a
- (b) Bachelor's degree from an accredited institution: score two credits or, if the degree is in engineering, physical sciences, mathematics, or quality assurance, score three credits; in addition, score one credit for a master's degree in engineering, physical sciences, business management, or quality assurance from an accredited institution.

A.4.3.2 Experience (Nine Credits Maximum)

- (a) Experience in ASME Code activities: score one credit for each full year with a maximum of seven credits for this aspect of experience.
- (b) If two years of experience have been in auditing, score two additional credits.

A.4.3.3 Professional Accomplishments (Two Credits Maximum)

For certification of competency in engineering science, auditing or quality assurance specialties issued and approved by a state agency or national professional or technical society: score two credits.

A.4.3.4 Rights of Management (Two Credits Maximum)

The DAI may grant up to two credits for other performance factors applicable to auditing. Examples of these factors are leadership, sound judgment, maturity, analytical ability, tenacity, past performance, and quality assurance training courses.

A.5 QUALIFICATION

- A.5.1** The DAI shall issue a Qualification of ASME Internal Auditor or Internal Audit Team Leader (Form A.2) upon satisfactory completion of requirements for qualification as documented on the Record of ASME Auditor Qualification (Form A.1).

A.6 MAINTENANCE OF QUALIFICATION

A.6.1 IAT Leaders and Internal Auditors shall maintain their proficiency through one or more of the following: active participation in audits, review of Codes, Standards and Guidelines related to quality auditing, participation in training programs and any activities related to auditing.

A.6.2 Based upon a satisfactory triennial evaluation documented on Form A.3 and approved by the DAI the IAT Leader's and Internal Auditor's qualification is extended for three years.

A.7 REQUALIFICATION

A.7.1 IAT Leaders and Internal Auditors who fail to maintain their qualification shall be required to requalify in accordance with the requirements of this procedure.

A.8 RECORDS

A.8.1 The DAI shall maintain the records of qualification for at least one year after the individual has terminated or transferred from the auditing function. The contents of this file can be part of the auditor's established designee file.

ASME shall maintain these files while the individual provides these services and for one year after the individual's services are no longer used.

RECORD OF ASME INTERNAL AUDITOR QUALIFICATION

NAME: _____

- | | |
|--|----------------|
| 1. QUALIFICATION REQUIREMENTS | CREDITS |
| <hr/> | |
| 1.1 EDUCATION | 4 Credits Max. |
| University Degree/Date | |
| 1. Undergraduate Level | |
| 2. Graduate Level | |
| <hr/> | |
| 1.2 EXPERIENCE - Dates of Activity | 9 Credits Max |
| Codes & Standards (7 Credits Max.) | |
| And | |
| Auditing (2 Credits Max.) | |
| <hr/> | |
| 1.3 PROFESSIONAL ACCOMPLISHMENT - Certificate/Date | 2 Credits Max |
| 1. P.E. | |
| 2. Society | |
| <hr/> | |
| 1.4 MANAGEMENT - Justification/Evaluator/Date | 2 Credits Max. |

Explain:

Evaluated By: (Name & Title) _____ Date _____

Total Credits _____

- | | | |
|------------------------|----------|------------------|
| 2. AUDIT PARTICIPATION | | |
| | Location | Activity Audited |
| | | Date |
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
3. AUDITOR QUALIFICATION CREDIT VERIFIED BY _____

Signature Director, Auditing and Inspection_____
Date

FORM A.1

QUALIFICATION OF ASME INTERNAL AUDITOR OR
INTERNAL AUDIT TEAM LEADER

Name: _____

Level of Qualification:

Internal Auditor ()

Internal Audit Team Leader ()

Date of Qualification: _____

Date of Expiration: _____

Approval: _____ **Date:** _____
Director, Auditing and Inspection

NOTE: To remain valid this qualification is subject to a Triennial Evaluation which shall be documented on Form A.3.

FORM A.2

**TRIENNIAL EVALUATION
FOR
QUALIFICATION OF ASME INTERNAL AUDITORS OR
INTERNAL AUDIT TEAM LEADER**

Name: _____

Triennial Evaluation Date:_____ **Qualification Renewal Date:**_____

Qualification Expiration Date: _____

Level of Qualification:

Internal Auditor ()

Internal Audit Team Leader ()

Audit Participation

Location

Date

Codes and Standards Activity:

Activity

Date

Training

Description

Date

Renewal of Qualifications Approved By:

_____ Date: _____
Director, Auditing and Inspection

FORM A.3

APPENDIX B

Internal Audit Deviation/Observation Form		Deviation/Observation No. _____
Date _____ Audit No. _____ Activity audited _____		
Auditor _____ Auditee Contact _____		
Deviation <input type="checkbox"/> Observation <input type="checkbox"/> Reference Document _____		
Signature: Auditor _____ Date _____ Audit Team Leader _____ Date _____		
Signature of Auditee Representative _____ Date _____		
<div style="display: flex; justify-content: space-between;"> To Be Completed For Deviation: To be completed by auditee representative </div> <p>(1) Cause for deviation or, if contested, basis for disputing reported deviation:</p> <p>(2) Corrective action taken or to be taken to resolve deviation:</p> <p>(3) Corrective action to prevent recurrence:</p> <p>(4) Date when full compliance will be achieved: _____</p> <p>Signature of Auditee Representative _____ Date _____</p> <p>Deviation Satisfactorily Closed: YES___ NO___ Signature of Audit Team Leader _____</p> <p>Remarks:</p>		
<div style="display: flex; justify-content: space-between;"> To Be Completed For Observation: To be completed by auditee representative </div> <p>(1) Indicate acknowledgement of the identified performance weakness or, if contested, the basis for the validity of the observation, stated in terms of the program's performance:</p> <p>(2) The steps or measures that have been taken or will be taken to improve the program's performance:</p> <p>3) Date when the steps or measures will be completed: _____</p> <p>Signature of Auditee Representative _____ Date _____</p> <p>Observation Satisfactorily Closed: YES___ NO___ Signature of Audit Team Leader _____</p> <p>Remarks:</p>		