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CP14 ISSUE 4 REV B

BINDT AUDIT PROCEDURE AND REPORT FORMS

APPENDICES

[Appendix 1](#) BINDT Audit report forms

ASSOCIATED DOCUMENTS:

- QS1 ISO 9001: 2008 (Interpretation for NDT): Guidance for organizations seeking BINDT Quality Management Systems certification for the provision of Non-Destructive Testing services
- CP9 Requirements for BINDT Authorised Qualifying Bodies
- CP10 Guidance on the procedure for conduct of BINDT assessments
- CP19 Informal access to BINDT Authorised Qualifying Bodies by third parties

SCOPE

This document provides guidance to BINDT appointed assessors conducting technical and quality management systems audits of clients for ISO 9000 registration, and to subcontractors for approval by prime contractors – including those organisations seeking to gain or maintain BINDT Authorise Qualifying Body status. Although primarily intended for the use of assessors to ensure a consistent approach to the conduct of BINDT audits, it is recognised that this document could be of interest to auditees, and it is therefore to be made publicly available in the interests of transparency of information.

TERMS AND DEFINITIONS

The terms and definitions used in CP9 and QSI apply to this document.

Any reference to BINDT, in the context of this document, means the Certification Services Division of the British Institute of NDT.

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The British Institute of Non-Destructive Testing is an accredited certification body offering personnel and quality management systems assessment and certification against criteria set out in international and European standards through the PCN Certification Scheme.



1. INTRODUCTION

1.1 The Certification Services Division (CSD) of the British Institute of Non-Destructive Testing (BINDT) will appoint assessors with appropriate qualifications and experience to carry out quality system audits. The following section deals with the responsibilities of the lead assessor.

1.2 Lead assessors are required to adopt the positive reporting technique for all assessments. This will include reference on checklists and, where appropriate, on report forms, to any documents or records reviewed in the course of the audit. Re-assessment audits will be carried out biennially, with no intervening surveillance audits, unless serious problems are revealed either during assessment or from other sources. If problems are revealed more frequent assessments are to be conducted until such time as consistent satisfactory performance against specifications is established.

Audit records are retained in the organisation's audit file at BINDT, and are sent to the appointed lead assessor prior to the assessment or surveillance.

1.3 The lead assessor's narrative report should not be compiled at the assessed organisation on the day of the assessment, but should be subsequently completed as soon as possible. The following is to be typed on form CR (CP14 Appendix 1) and continuation sheets (report forms are available to assessors in MS Word file format):

1.3.1 organisation and date/type of assessment.

1.3.2 Scope of approval or certification (obtainable from BINDT)

1.3.3 Assessment team members

1.3.4 Organisation's senior representative (and position) in attendance

1.3.5 QMS maturity e.g. start date, revision history and any recent significant changes

1.3.6 Significant areas where QMS works well

1.3.7 Summary of overall effectiveness of QMS, highlighting strengths and weaknesses

1.3.8 Statement on the management's ongoing commitment to the system and future improvements

1.3.9 Assessor's suggestions (where applicable) for improvement in audit documentation

1.4 Address reports to BINDT for the attention of the Certification Services Division Manager.

1.5 Retain any forms DR until such time as the assessed organisation has provided satisfactory evidence of appropriate corrective action. When satisfied, sign off DRs and return, together with any further recommendations, to the Certification Services Division Manager.

2. THE ASSESSMENT TEAM MEETING - LEAD ASSESSOR'S RESPONSIBILITIES

2.1 Outline the audit programme and agree the format of assessment and areas of responsibility.

2.2 Ensure that the audit team understands what is required of them and that they will be supported by the lead assessor where necessary.

3. THE OPENING MEETING - LEAD ASSESSOR'S RESPONSIBILITIES

3.1 Introduce the members of the team and ascertain which members of the auditee's staff are to accompany team members. The senior representative of the auditee will be asked to introduce other involved staff if this has not already been done. Outline the disposition of the assessment team.

3.2 The Lead Assessor will inform the representative of the auditee that the assessment is to ensure compliance with specified requirements and the organisation's own quality management system against the scope of approval or certification sought by the organisation concerned.

3.3 The lead assessor will inform the senior representative of the assessed organisation and the assessment team members that if there is an apparent non-compliance (NC) with the requirements, the assessor observing the NC will detail his observation on a form DR, quoting the reference from the relevant criteria. The auditee's representative will be asked to sign the DR there and then to signify that the observation is accurate. This observation will not be categorised until the final team meeting.

3.4 The lead assessor will outline the timetable and inform the auditee's senior representative that all staff involved in the assessment will be expected to attend the final open meeting, at which time the findings of the team will be presented.

4. FINAL TEAM MEETING - LEAD ASSESSOR'S RESPONSIBILITIES

4.1 Collate all DR forms (a form DR must be completed for each apparent non-compliance), ensuring that the correct document reference has been allocated, and categorise each DR as a non-compliance or observation after consultation with team.

4.2 Raise summary report.

4.3 Agree conduct of final open meeting, e.g. will the observing audit team member explain the observation/non-compliance or will only the lead assessor discuss DRs with the senior representative of the assessed organisation?

5. FINAL OPEN MEETING - LEAD ASSESSOR'S RESPONSIBILITIES

5.1 Emphasise at this point that the assessment is a sampling exercise and that there may be non-compliances which were not observed by the team.

5.2 Discuss non-compliances, agreeing corrective actions with the company representative for quality.

5.3 The company representative will be expected to propose at this meeting, or within 7 days following the audit, what actions will be taken to clear any observed non-compliance, together with a date for clearance. The proposed corrective actions must be to the satisfaction of the lead assessor, and should be satisfactorily implemented within three months of the audit. However, if circumstances warrant, the lead assessor may agree a date up to six months from the assessment for corrective action. Enter this date on the DR and invite the senior representative of the assessed organisation to sign this form.

5.4 When all DR and the SR forms have been dealt with, present the summary report and state clearly what the recommendation will be, i.e. A, B, C or D, as detailed on form CR. The assessed organisation should take copies of SR and DRs but are not permitted a copy of CR, which is confidential to BINDT and its assessors.

5.5 Inform the auditee's representative that, though you will make recommendations, the final decision on approval is taken by BINDT.

5.6 Assessors must not offer advice or become involved in any acrimonious discussion about the requirements; they are simply reporting what they find.

5.8 Report any inconsistencies within the documents directly to BINDT.

6. GENERAL - ALL ASSESSOR'S RESPONSIBILITIES

6.1 Confine observations to non-compliance with requirements, and phrase narrative in the terms of the appropriate criterion wherever possible. Ensure that a reference to the criteria is quoted.

6.2 Do not offer any advice that may be construed as consultancy (which, in third party assessments, is prohibited under the terms of UKAS accreditation).

6.3 Maintain a formal relationship, even if auditee's staffs are known personally.

6.4 Do not hesitate to withdraw a DR if a satisfactory explanation is offered in respect of an observation which is subsequently shown not to be a NC. If an NC can be cleared simply and to the assessor's satisfaction during the audit it is not necessary to raise a DR.

6.5 Stick to the audit timetable. Do not be side-tracked into extended lunch breaks or tours of interest/introductions to management etc..

7. LEAD ASSESSOR – POST ASSESSMENT RESPONSIBILITIES

7.1 The lead assessor is responsible for reviewing and accepting evidence of satisfactory implementation of corrective action, for raising and maintaining a record of clearance of corrective actions, and for forwarding completed audit documentation to BINDT for review and retention.