



Verification	Originator	Approved	Issued
Initials	TH	ST	ST
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TITLE: COFL-GTL-EP-4.5.5-1 Internal Audit Procedure

Person responsible: Internal Self-Audit Team Leader

Area of application: George T. Lohmeyer Wastewater Treatment Plant (GTL)

Document location: www.fortlauderdale.gov/ESMS

Revisions

Rev. No.	Date	Description
001	1/19/16	Revised the Audit schedule from a 3 year layout (A, B, C forms) to two years (A, B forms).

Recurring action items

Activity	Responsibility	Frequency
1. Review Internal Audit Procedure and checklist	Internal Self-Audit Team Leader	Annually or Within 30 days of any audit
2. Conduct Internal Audit at GTL	Internal Audit Team	Annually or Within 30 days of any audit
3. Generate Audit Report for Regional Wastewater Facility Manager	Internal Self-Audit Team Leader and Internal Audit Team	Annually or Within 30 days of any audit



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1.0 Purpose

- 1.1 The purpose of this procedure is to define the planning and implementation of internal ESMS audits and the follow up of nonconformances using corrective and / or preventive actions for GTL.
- 1.2 To determine whether the ESMS and operations of GTL conform to the ISO 14001:2004 standard.
- 1.3 Internal ESMS Auditing or management system audits are clearly different than Environmental Compliance Evaluations (or Compliance Auditing.) Refer to **COFL-GTL-EP 4.5.5.2-1 Evaluation of Compliance** procedure for further details.



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2.0 Scope

- 2.1 This procedure is responsive to element 4.5.5, Internal Audit, of the ISO 14001:2004 standard and covers operations of GTL.
- 2.2 The scope of this procedure addresses setting ESMS audit criteria and establishing a process to obtain, evaluate and communicate objective evidence required to determine conformance to the ISO 14001:2004 standard.

3.0 Responsibility

- 3.1 The **Internal Self-Audit Team Leader** will coordinate the implementation of an Internal ESMS Audit on an annual basis. All elements of the ESMS (or ISO 14001 standard) will be included in the audit scope.
- 3.2 The **ESMS Management Representative** is responsible for appointing the ESMS Internal Self-Audit Team members, and providing the appropriate training necessary for Internal ESMS Auditing.
- 3.3 The **ESMS Internal Self-Audit Team** upon completion of the audit will review any findings with GTL's management personnel from the area being audited, if warranted. They will document Nonconformance's on the appropriate forms and develop the necessary implementation schedules.
- 3.4 The ESMS Internal Self-Audit Team members conducting the audits will have no responsibility for the area or activity being audited.
- 3.5 Documentation from the Internal ESMS Audit will be maintained as records by the ESMS Coordinator.

4.0 Definitions

- 4.1 Refer to **COFL-GTL-4.4.4-2 Related Definitions Procedure**

5.0 Process

- 5.1 The ESMS Internal Self-Audit Team will be appointed by the ESMS Management Representative and can be comprised of any of the following: non-conflicting core ESMS Team members, individuals from other departments, members appointed by Management Representative, and / or third parties.
 - 5.1.1 The ESMS Internal Self-Audit Team members will have received Internal ESMS Auditor training. The ESMS Internal Self-Audit Team members will carry out audits and report the results to the Management Representative and GTL Team.
- 5.2 The intention or notification to perform an Internal ESMS Self-Audit is coordinated and communicated by the ESMS Management Representative to GTL's affected



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- areas. This may be accomplished by use of **COFL-GTL-EP 4.5.5-1 A Internal ESMS Audit Notification and Schedule** form and can be sent electronically as an e-mail attachment.
- 5.3 Based on environmental importance, an internal audit of the ESMS will be conducted at least annually or as provided with the internal audit schedule. Areas of concern from previous internal audits (e.g. major nonconformance findings) will be documented and routinely audited.
- 5.3.1 If nonconformance continues to occur in specific areas, then the frequency of auditing will be increased for those areas, as determined by the ESMS Management Representative.
- 5.4 Prior to the initiation of the Internal ESMS Self-Audit, the ESMS Internal Self-Audit Team will offer to conduct a brief opening meeting with individuals from the affected GTL areas. The agenda may include:
- 5.4.1 Introduction of the ESMS Internal Self-Audit Team;
- 5.4.2 Review of audit purpose, objectives and scope;
- 5.4.3 Review of audit frequency;
- 5.4.4 Confirm time and location of closing debriefing(s);
- 5.4.5 Discussion of final audit report submittal and corrective action process;
- 5.4.6 Questions and answers.
- 5.5 The ESMS Internal Self-Audit Team is provided a checklist, **COFL-GTL-EP 4.5.5-1 B Internal ESMS Auditing Checklist**, which will assist in the basis of the audit. These checklists will be relevant to GTL's activities. The ESMS Internal Self-Audit Team may review and amend the audit questions as necessary. The ESMS Internal Self-Audit Team may also use other types of appropriate auditing documentation.
- 5.6 During the Internal ESMS Self-Audit, the ESMS Internal Self-Audit Team will record audit observations on the checklists and other designated working papers only. These documents will be returned at the end of the audit and become records of the audit observations. This objective evidence will provide enough information to document the essence of the activities products or services reviewed.
- 5.7 Nonconformance findings requiring corrective action are documented on **COFL-GTL-EP 4.5.3-1 Corrective Action Request (CAR)** forms. The CARs will be compiled into a list and documented on **COFL-GTL-EP 4.5.3-1 Corrective Action Log / Report** form. These forms will be used, as appropriate, and follow the **COFL-GTL-EP 4.5.3-1 Nonconformity, Corrective and Preventive Action** procedure.



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- 5.7.1 The ESMS Internal Self-Audit Team will evaluate Corrective Actions Requests (CARs) for completion and effectiveness. The timing of the evaluation will reflect the significance of the issue.
- 5.8 **Observations** and recommendations for improvement are documented on checklists, CARs and / or other appropriate documentation.
 - 5.8.1 **COFL-GTL-EP 4.5.3-1 Preventive Action Proposal (PAP)** form may be issued to the area in order to prevent a nonconformance from occurring.
- 5.9 The Regional Wastewater Facility Manager will present the relevant Corrective Action Requests (CARs) and Preventive Action Proposals (PAPs) to GTL Team responsible for the area of the nonconformance. A copy of the documents will be kept and forwarded to the ESMS Coordinator with the checklists and other appropriate documentation at the end of the audit.
 - 5.9.1 All nonconformance items documented by the ESMS Internal Self-Audit Team during the Internal ESMS Self-Audit are to receive timely and thorough corrective and preventive actions, as appropriate by the management of the area responsible, per the **COFL-GTL-EP 4.5.3-1 Nonconformity, Corrective and Preventive Action** procedure.
- 5.10 Upon the close of the audit, a member of the ESMS Internal Self-Audit Team will conduct a closing conference to present a verbal summary of the Internal ESMS Self-Audit findings to the relevant personnel. This meeting's agenda may include:
 - 5.10.1 Brief review of audit objective and scope;
 - 5.10.2 Summary of nonconformance findings;
 - 5.10.3 Discussion of the program to address nonconformance;
 - 5.10.4 Confirm milestone dates for corrective action;
 - 5.10.5 Discussion of final audit report submittal;
 - 5.10.6 Questions and answers.
- 5.11 Results of the Internal ESMS Self-Audits are formally communicated to the Management Review Team during the Management Review Meeting as per the **COFL-GTL-EP 4.6.12-1 Management Review** procedure.

6.0 References / Related Documents

- 6.1 COFL-GTL-EP 4.5.5-1 A Internal ESMS Audit Notification and Schedule form
- 6.2 COFL-GTL-EP 4.5.5-1 B Internal ESMS Audit Checklist form
- 6.3 COFL-GTL-EP 4.5.3-1 Corrective Action Request (CAR) form



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- 6.4 COFL-GTL-EP 4.5.3-1 Corrective Action Log form
- 6.5 COFL-GTL-EP 4.5.3-1 Preventive Action Proposal (PAP) form
- 6.6 COFL-GTL-EP 4.5.3-1 Nonconformity, Corrective and Preventive Action procedure
- 6.7 COFL-GTL-EP 4.6.12-1 Management Review procedure
- 6.8 COFL-GTL-EP-4.5.5-2 Internal Audit Annual Review Maintenance