JINDAL ALUMINIUM LIMITED (ROLLING & EXTRUSION DIVISION) PROCEDURE FOR INTERNAL AUDIT DOC. NO. JAL/R&E/IA/PR/03 TITLE PAGE Issue # Issue Date Revision No. Revision Date B 05/02/2018 00 05/02/2018

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AMENDMENT RECORD

	AMENDMENT		DISCARD		INSERT	
SI No	Date	Description	Page No.	Rev. No.	Page No.	Rev. No.

	POSITION	SIGNATURE	DATE
Prepared & Verified by	AM-ISO CELL		
Approved by	QMS COORDINATOR		

(RC	JINDAL ALUMINIUM LIMITED (ROLLING & EXTRUSION DIVISION) TITLE:-PROCEDURE FOR INTERNAL AUDIT			
Doc. No. JAL/R&E/IA/PR/03 Rev. No.: 00 Rev Date :05/02/2018 Page # 01				

SECTIONS		PAGE NO.
	INDEX	01
1.0	PURPOSE	02
2.0	SCOPE	02
3.0	RESPONSBILITIES AND AUTHORITY	02
4.0	REFERENCES	03
5.0	DEFINITONS	03 -04
6.0	PROCEDURE FOR INTERNAL AUDIT	04
7.0	FOLLOW UP ACTION	04
8.0	LIST OF RECORDS	04

JINDAL ALUMINIUM LIMITED (ROLLING & EXTRUSION DIVISION)			
TITLE : - PROCEDURE FOR INTERNAL AUDIT			
Doc. No. JAL/R&E/IA/PR/03 Rev. No.: 00 Rev Date :05/02/2018 Page # 02			

1.0 PURPOSE

This document covers the procedure for carrying out internal audits to verify whether the Quality activities comply with the arrangements planned in the quality Manual, Departmental Procedures, Formats and documented information retained to determine the effectiveness of the Quality Management System.

2.0 SCOPE

The internal Audit Procedure contained here shall apply to all Departments of JAL R&E Division as indicated in the Quality Manual. They are undertaken to check that current practices conform to defined procedures and that the practices and procedures are effective. (As per Clause 9.2 of IS/ISO-9001:2015 - Internal Audit).

3.0 RESPONSBILITIES AND AUTHORITY (CI: 5.3 of IS/ISO-9001:2015)

3.1. QMS COORDINATOR

The QMS coordinator is fully responsible for Internal Audits under guidance of Vice President. The main responsibilities are:

- Establishing and maintaining Annual Internal Audit plan & schedule of Audits covering all elements of the Quality Management System.
- Maintaining a list of qualified Auditors, assigning them to audits and monitoring the conduct of audits
- Review the audit results and reschedule the audits on the basis of the status and importance
 of the activity.
- To record the results of the audits and bring it to the attention of the personnel having responsibility in the area audited.
- To ensure that the management personnel responsible for the area take timely corrective action on the deficiencies found during the audit
- To ensure non-conformities are effectively closed and area for improvements are identified and action taken.
- To maintain the results of audits and the corrective actions taken.
- To prepare Internal Audit summary.

3.2 AM-ISO CELL

The AM-ISO CELL will be assisting the QMS coordinator in the effective implementation of the system and implementations of corrective actions. The main responsibilities are

- Maintenance of the documents of the Quality Management System.
- To incorporate changes/modifications in the documents pertaining to Quality Management System after a formal approval by the concerned authority.
- To retrieve obsolete documents and retain them wherever documents are changed and issued for a period of 3 years.
- To assist the QMS coordinator in monitoring the effective implementation of the corrective actions.

JINDAL ALUMINIUM LIMITED (ROLLING & EXTRUSION DIVISION)			
TITLE : - PROCEDURE FOR INTERNAL AUDIT			
Doc. No. JAL/R&E/IA/PR/03 Rev. No.: 00 Rev Date :05/02/2018 Page # 03			

4.0 REFERENCES

- Reference is brought to the following National Standards on 'Auditing Management Systems'. IS/ISO 19011: 2011 Guidelines for Auditing Management Systems.
- References is brought to the following Procedures of the Quality Management System of the company:

SI. No.	Description of procedure Procedure number	
1	Control of Documented Information	JAL/R&E/DOC/PR/01
2	Retaining of Documented Information	JAL/R&E/RDI/PR/02
3	Internal Audit	JAL/R&E/IA/PR/03
4	Control of Non-conforming Outputs	JAL/R&E/NCO/PR/04
5	Non conformity & Corrective Action	JAL/R&E/NCA/PR/05
6	Cast House	JAL/R&E/CH/PR/06
7	Rolling	JAL/R&E/ROL/PR/07
8	Extrusion Foundry	JAL/R&E/EFOU/PR/08
9	Extrusion Production	JAL/R&E/EPRN/PR/09
10	Rolling Quality Assurance	JAL/R&E/QA/PR/10
11	Extrusion Quality Assurance	JAL/R&E/EQA/PR/11
12	Extrusion Tool Shop	JAL/R&E/TS/PR/12
13	Rolling PPC	JAL/R&E /PPC/PR/13
14	Maintenance	JAL/ R&E /MAT/PR/14
15	Purchase (Indigenous)	JAL/R&E/PUR(IND)/PR/15
16	Stores	JAL/R&E/STO/PR/17
17	Packing and Shipping	JAL/R&E/SHP/PR/18
18	Marketing-Domestic	JAL/R&E/MAR(D)/PR/19
19	Marketing-Exports	JAL/R&E/MAR(E)/PR/20
20	Management review meeting	JAL/R&E/MRM/PR/21
21	Training	JAL/R&E/TRG/PR/22
22	Risk & opportunities	JAL/R&E/RO/PR/23

5 **DEFINITIONS**

The following definitions are relevant for this procedure:

- Audit A Systematic, independent and documented process for obtaining audit evidence and evaluating it objectively to determine the extent to which audit criteria are fulfilled.
- Auditor A person with the competence to conduct an audit.
- Auditees The organization to be audited
- Conformity The fulfillment of a requirement.

JINDAL ALUMINIUM LIMITED (ROLLING & EXTRUSION DIVISION)				
TITLE : - PROCEDURE FOR INTERNAL AUDIT & MRM				
Doc. No. JAL/R&E/IA/PR/03 Rev. No.: 00 Rev Date :05/02/2018 Page # 04				# 04

- Non-Conformity the non-fulfillment of requirements.
- Audit Programme A set of one or more audits planned for a specific time frame and directed towards a specific purpose.
- Improvement Activity to enhance performance

6 PROCEDURE FOR INTERNAL AUDIT

- Audit plan will be prepared annually.
- 6.2 Internal Audit is carried out once in 4 months to check the compliance as per ISO-9001:2015.
- 6.3 The audit schedule is as fixed by the QMS coordinator and circulates to all departments through mail.
- 6.4 The individual departments are audited against their respective documented procedures and the auditors follow the checklist prepared for each department and the audit findings are recorded in Internal Audit Observation sheet as per format no. JAL/R&E/IA/F/02
- 6.5 The auditor shall be a person who has been trained and qualified as an Internal Auditor.
- 6.6 After the audit, the audit observation will be recorded in the Format No.JAL/R&E/IA/F/03.
- 6.7 The completed Internal Audit Report is sent to HODs of the areas audited, in order to report the findings and results.
- 6.8 In case of any Non –conformity will be documented in format no. JAL/R&E/IA/F/04 by the auditor and brought to the attention of the personnel having responsibility in the area audited. The Departmental heads responsible for the area take timely corrective action on the deficiencies found by the audit.
- 6.9 QMS coordinator to verify the implementation of corrective actions recommended against the NCR's (Non-Conformity Report) of the previous Audit Reports and their effectiveness.

7 FOLLOW UP ACTION

- The QMS Coordinator shall organize Follow up Audits to review close out of NC identified.
- The Follow up Audits shall be done by the QMS Coordinator or auditor.
- The findings of the follow-up audits shall be reflected in the audit report

8 LIST OF RECORDS

SI. No	Description	Format No.	Retention period
1	Annual Internal Audit plan	JAL/R&E/IA/F/01	1 Year
2	Internal Audit Schedule	JAL/R&E/IA/F/02	1 Year
3	Internal Audit Observation	JAL/R&E/IA/F/03	1 Year
4	Non Conformity Report	JAL/R&E/IA/F/04	3 Years
5	Summary of Internal Audit	JAL/R&E/IA/F/05	1 Year
6	Audit checklist	JAL/R&E/IA/F/06	3 Years

JINDAL ALUMINIUM LIMITED

(ROLLING & EXTRUSION DIVISION)		
Rev. No.: 00	Rev Date :05/02/2018	

INTERNAL AUDIT SCHEDULE (JAL/R&E/IA/F/02)

Date:

SI. No.	Date of Audit	Time in Hrs	Department to be Audited	Auditor	Auditee	Auditee's Assistants
01	02	03	04	05	06	07

ISSUED BY

QMS COORDINATOR

RETENTION PERIOD – 1 year

Rev. No.: 00 Rev Date : 05/02/2018

INTERNAL AUDIT OBSERVATION

(JAL/R&E/IA/F/03)

I= ICO 0004.004F		Dl
IS/ISO procedure No.	Sheet Number:	
Auditor :	Auditee(s):	
Department :	Date of audit :	

SI No.	ISO 9001:2015 Clause No.	Observation(s)	Remarks
	0.00.00		

	Resp	onse	to	audit	b١	/ Auditee:
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Name of Auditor: Signature of Auditor:

RETENTION PERIOD – 1 year

Rev. No.: 00 Rev Date : 05/02/2018

NON-CONFORMITY REPORT (NCR) ISO 9001: 2015

(JAL/R&E/IA/F/04)

NCR Ref. No.:

Department	Date of Audit	
Procedure Ref No	ISO 9001:2015 Clause No.	
	Procedure Clause	
Auditor	Auditee	
Non Conformity Observed:		
		Auditor's Signature
Probable causes for Non-Conformity:		
Corrective Action:		
Proposed completion date:		Auditee Signature
Follow up Audit comment:		
Date :		
NCR : CLOSED / OPEN		
	Cionesture of Audia	tor / OMC coordinates
	Signature of Audit	tor / QMS coordinator

Retention Period – 3 years

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(ROLLING & EXTRUSION DIVISION)							
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Rev. No.: 00 Rev Date : 05/02/2018

SUMMARY OF INTERNAL AUDIT

(JAL/R&E/IA/F/05)

DATE:

SI No	DEPT	DATE OF AUDIT	AUDITOR	AUDITEE	AFI	NO. OF NCS	NO OF NC IN PREV AUDIT	NO OF NC PENDING IN PREV AUDIT	REMARKS

LEGEND:

AFI – AREA FOR IMPROVEMENT NC – NON-CONFORMANCE

Rev. No.: 00 Rev Date :05/02/2018

ANNUAL INTERNAL AUDIT PLAN JAL/R&E/IA/F/01													
	Month										Year:		
Activities	Plan/Actual	APRIL	MAY	JUNE	JULY	AUG	SEPT	ОСТ	NOV	DEC	JAN	FEB	MAR
Internal	Р												
Audit	А												
NOTE: Internal audit once in 4 months													
<u>Legend</u> : P – Planned A – Actual	P – Planned												

Rev. No.: 00 Rev Date :05/02/2018

CHECK LIST FOR INTERNAL AUDIT OF QMS AS PER IS/ISO 9001:2015 (As per Procedure No.JAL/R&E/IA/PR/03) DEPARTMENT PROCEDURE NO MAIN ISO CLAUSE NUMBER

SI. No.	Details	ISO 9001:2015 Clause No	Reference to Format / Documents No. if any	Observation by Auditor

Retention Period - 3 years