DCMA NSEO QUALITY PROCESS SURVEILLANCE

(QPS) CHECKLIST #21

INTERNAL QUALITY AUDITS

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | **SUPPLIER & CAGE:** |  | |  |  | | **LOCATION:** |  | |  |  |   **Program Type:**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | Level I/SUSBAFE (LI/SS) |  | Navy Propulsion Program (NPP) |  | Deep Submergence Systems/Scope of Certification Program (DSS-SOC) | |  | Nuclear Plant Material (NPM) |  | Naval Nuclear Propulsion Program (NNPP) |  | Aircraft Launch & Recovery Equipment (ALRE) | |  | Fly By Wire Ships Control Systems (FBWSCS) |  | Ships Critical Safety Items (SCSIs) |  | Other: |   **Contractual Requirement(s) for this process:**   |  | | --- | |  |   **Supplier Procedure Number(s), Title(s) & Revision Level(s)/Date(s):**   |  | | --- | |  |  |  |  |  | | --- | --- | --- | | Surveillance Performed By: |  | | |  |  | | | Date(s) of Surveillance: |  | | | Contract Number(s): | |  | |  | |  | | Part Number(s)/Serial number(s)/NSN: | |  | |  | |  | | Part Nomenclature(s): | |  | |  | |  | | Supplier Personnel Contacted and Titles: | |  | |  | |  | | Drawing Number & Revision: | |  | |

**Process Concerns and Guidance:**

* Documented procedures not being complied with
* Past joint audits find suppliers are not doing a thorough job conducting internal audits.
* Internal auditors are not properly trained on auditing techniques/principles.
* Internal auditors are not familiar with procedures/processes they are auditing.
* Internal audit schedules are not adjusted based on risk.
* The results of internal audits/corrective action plans are not properly addressed to prevent recurrence
* Internal auditors should not audit their respective areas.
* Verify results of audits are properly documented.
* Verify and validate any corrective/preventive actions taken as a result of the internal audit.
* Ensure procedures are being followed to provide for a comprehensive system of planned and documented internal quality audits to verify the effectiveness of the quality system.
* Is there a planned audit schedule available showing the schedule of audits over a reasonable period of time (1 year)?
* Are audit results brought to the attention of personnel having responsibilities in the areas audited?
* Are results brought to the attention of senior management for action when required?

**QARs should use the “BASIS OF DETERMINATION” column to document the objective quality evidence and/or clarify the rationale used to support their decision. (e.g. direct observation, documents verified etc.)**

S = Satisfactory U = Unsatisfactory

|  |  |  |  |
| --- | --- | --- | --- |
| **SURVEILLANCE QUESTIONS** | **S** | **U** | **BASIS OF DETERMINATION** |
| 1. Are personnel performing audits properly trained and qualified? |  |  |  |
| 1. Are the audits performed by personnel independent of the area being audited? |  |  |  |
| 1. Are audit results brought to the attention of personnel having responsibilities in the areas audited? |  |  |  |
| 1. Are audit results brought to the attention of senior management for action when required? |  |  |  |
| 1. Are audits being scheduled and performed on the basis of the status and importance of the activity being audited? |  |  |  |
| 1. Is there a planned audit schedule available showing the schedule of audits over a reasonable period of time? Are audits added to the established schedule when warranted or required? |  |  |  |
| 1. Has management taken timely corrective action for areas found deficient? |  |  |  |
| 1. Do audit records meet all procedural requirements and clearly identify the results of each audit? Do the audit records indicate whether quality activities comply with and address the effectiveness of the quality system? |  |  |  |
| 1. Were follow-up actions performed to ensure corrective actions are properly implemented and effective in precluding recurrence? |  |  |  |
| 1. For any personnel directly observed performing internal quality audits, are the personnel going in-depth and being thorough enough to determine process compliance with approved procedures or find other process problems? |  |  |  |
| Other Observations |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Overall MPS Results:** | **SATISFACTORY** |  | **UNSATISFACTORY** |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Corrective Action Generated?** | **No** |  |  | **Yes** |  |  | **CAR#** |  |

**FOLLOW-UP ACTION REQUIRED?**

|  |
| --- |
|  |

**SUMMARY/NOTES/COMMENTS/CONCERNS**:

|  |
| --- |
|  |