N/C's Justification Exercise 06

The following objective evidence statements have been used to justify Non Conformities (findings). You are requested to grade them as **Acceptable** or **Not Acceptable** and be ready to substantiate your decision.

Objective Evidence	Acceptable or	Justification
	Not	
	Acceptable	
The audit team failed to cover statutory		
requirements thoroughly.		
The audit did not cover the management		
commitment to implementing the policy for		
assigning roles and responsibilities (document		
issue) and allocating resources.		
The audit did not insist on keeping HACCP records.		
The contract with supplier and/ or the		
organisation's document "" does not cover the		
satisfaction of the requirement of clause 3.1.(2) of		
the Accreditation Regulation (AR).		
ISO 9001 and ISO 14001 technical experts N. and		
K. have not signed the Code of Conduct or a		
Confidentiality Agreements.		
The organisation's auditor records are not		
complete. Documents included in other records are		
missing, something that was not detected during		
the last audit.		
Section 5.7, clause 12 and section 5.8, clause 4 of		
the organisation's document "" states that the		
organisation awards certification, even if some non		
conformities have not been closed out (irrespective		
of their grading)		
The list of approved auditors includes Mr. N.P. as		
an ISO 22000 auditor, although he is not certified to		
conduct ISO 22000 audits.		
The assessment team for confectionery raw		
materials () is not competent as to the auditors		
(mechanical engineer and chemical engineer) or		
the technical expert (vet).		
Accreditation Body has not been notified of a		
significant change to the structure of the CB.		
Deficient control and distribution of internal and		
external documents.		
The criteria/ substantiating reasons for reducing		
audit days, including the cases of combined audits,		
are not documented.		

There is no updated organisational flowchart and	
no delegates are assigned	
An internal audit of the QMS was not conducted by	
a person other than the Quality Manager.	
Deficiencies in audit reports and closing of non	
conformities on the basis of insufficient evidence	
have been detected.	
There is no provision for managing customer	
complaints from companies undergoing certification	
Deficiencies in employee files have been detected.	
A certificate has been maintained for almost a year,	
despite 9 open non conformities	
There are deficiencies in the documentation for the	
suitability of welders in a customer file.	
The requirements for assessing and monitoring	
subcontractors are not implemented.	
The audit and decision making are based on	
rigorous principles, which however are not properly	
documented as criteria.	
The Impartiality Committee is not completely	
impartial (a member of the Board of Directors is	
also the Chairman of the Impartiality Committee).	
Also, parties with critical interests, such as doctors,	
nurses, etc., are not represented in it. Furthermore,	
it does not carry out the required control (e.g.	
applications, financial issues).	
There is no list for competence scopes for which	
the auditors have been assessed.	
7 relatively important non conformities have been	
issued, as opposed to 3 from the previous audit,	
which in addition had not been satisfactorily closed.	
Questions arise as to whether the mandate given to	
the audit teams is stable and adequate.	
A member of the Impartiality Committee has not	
signed a confidentiality agreement.	
There are gaps in the documentation in reviewing	
applications.	
The audit notes, on which the report is based, are	
missing.	
Auditors have not signed confidentiality	
agreements when auditing customers.	
Procedure CP-08 does not determine criteria for	
the appointment of a Lead Auditor or the process	
for appointing them.	
Form E-CP-05.02, which is included in the human	

resources management procedure CP-05, is not	
filled in completely. Delegates have not signed it	
and there is no information of the assessment of	
training effectiveness.	
The data on the financial stability, the resources	
and the social security insurance from the	
certification body are not available.	
There are inconsistencies and gaps in relation to	
the certification body's top management	
(organisational flowchart, signatures on the policy	
and the management review records).	
During the on-site audit of ABC Inc., the external	
consultants played a decisive part in the audit,	
superseding the company representatives.	
The organisation's confidentiality agreement and	
code of conduct forms do not clearly mention the	
case where the auditor is a former employee of the	
company to be audited.	
The certification body has issued a compliance	
certificate against ISO 9001, bearing the	
Accreditation logo to the company "CERAMICS	
S.A." which falls within a scope, which is not	
included in the existing accreditation scope of the	
certification body.	
The internal audit procedure QP-ADM-16 is not	
clear on the recording of non conformities and has	
not been revised since 20/6/2000.	
There is no documented procedure on managing	
complaints from third parties.	
No risk analysis has been conducted for the	
impartiality of participating members.	