



KENYA FOREST SERVICE

DOCUMENT TITLE: INTERNAL
QUALITY AUDIT

REF NO:KFS-MP-IQA-04

ISSUE NO: 2

REVISION NO: 1

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ISSUE HISTORY

ISSUE	DESCRIPTION OF CHANGE	PROCESS OWNER	EFFECTIVE DATE
1	None, no change has been done	Quality Management Representative	10 th June 2010
2	Changes Done to conform to ISO 9001:2015 standard	Quality Management Representative	31 st May 2018

REFERENCED DOCUMENTS

S/NO	REF	TITLE
1.	QPM	Quality Policy Manual
2	PM	Procedure Manual

COPY HOLDERS

1	Chief Conservator of Forests
2	QMR

RECORDS/ANNEXES

REC. NO	REC. TITLE
KFS/CD/FORM/001	Master List of Internal documents
KFS/CD/FORM/002	Distribution Record Sheet
KFS/CD/FORM/003	Document Change Requests Form
KFS/CD/FORM/004	Master list of External Documents
KFS-MP-CR-02	Control & Distribution of Documents

PREPARED BY: QMR

APPROVED BY: CCF



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1. TERMS AND DEFINITION

TERM	DEFINITION(S)
KFS	Kenya Forest Service
KPI	Key Performance Indicator
CSF	Critical Success Factor
CCF	Chief Conservator of Forests
QMR	Quality Management Representative
MP	Management Procedure

2. SCOPE

This procedure covers from planning the audit, carrying out the audit to preparing the audit report and follow up.

3. PURPOSE

To provide and define the necessary control measures for carrying out the internal audit activities.

4. OBJECTIVE

NB: Refer to the performance contract.

CSF	KPI	TARGET(S)	DUE

5. RESPONSIBILITY AND AUTHORITY

5.1. Chief Conservator of Forest

5.1.1. Ensures all audit issues are effectively addressed.

5.1.2. Ensures all necessary audit resources are availed.

5.2. Quality Management Representative

5.2.1. Overall responsible for ensuring the effectiveness of the quality management system.

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- 5.2.2. Prepares the Audit Schedules and circulates them to auditors / auditee.
- 5.2.3. Ensures audit program is followed. Receives audit reports and summarizes them for management review meetings.
- 5.2.4. Ensures audit findings are followed-up.
- 5.2.5. Records, maintains and distributes minutes of Management Review Meeting.

5.3. Deputy CCF

- 5.3.1. Overall responsible for ensuring the effectiveness of the quality management system.
- 5.3.2. Prepares the Audit Schedules and circulates them to auditors / auditee.
- 5.3.3. Ensures audit program is followed.
- 5.3.4. Receives audit reports and summarizes them for management review meetings.
- 5.3.5. Ensures audit findings are followed-up.
- 5.3.6. Records, maintains and distributes minutes of Management Review Meeting.

5.4. Section Heads

- 5.4.1. Responsible for implementing corrective and preventive actions following Internal Quality Audit reports affecting their departments.
- 5.4.2. Assigns corrective and preventive action tasks to staff in their departments.

5.5. Internal Quality Auditor(s)

- 5.5.1. Responsible for effectiveness and efficiency of the audit preparation, conduct and reporting.
- 5.5.2. Liaises with the auditee and ensures agreement is reached.
- 5.5.3. Conducts a desk study and prepares the working documents.
- 5.5.4. Conducts both opening and closing meetings.

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5.5.5. Conducts the compliance audit and fills the Non-conformance Report and the Audit summary report.

5.5.6. Follows up on the corrective action with the auditee.

5.5.7. Closes the audit.

5.6. Auditee

5.6.1. Ensures the required information is availed to the auditor.

5.6.2. Identifies and implements the appropriate corrective action.

5.7. All Staff

5.7.1. Carry out corrective and preventive action as assigned

6. RESOURCES, INPUTS AND OUTPUTS

6.1. Resources

6.1.1. Finances

6.1.2. Personnel

6.1.3. Infrastructure

6.2. Inputs

6.2.1. Audit plan

6.2.2. Audit Schedule

6.2.3. Audit Checklist

6.2.4. Finance and Motor vehicles

6.3. Outputs

6.3.1. Process improvement actions

6.3.2. QMS improvement actions

6.3.3. Product improvement actions

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- 6.3.4. Resource provision actions
- 6.3.5. Revised business plans and budgets
- 6.3.6. Changes to quality objectives and policies
- 6.3.7. Management meeting minutes

7. CRITERIA OF MEASUREMENT

NB: Refer to Performance progress reports

8. RISK AND OPPORTUNITIES

NB: Refer to the Service's Risk register

9. EVALUATION OF PROCESS

NB: Refer to the Monitoring and Evaluation Reports.

10.DETAILS OF PROCEDURE

Note 1: KFS will be undertaking internal quality audits twice per year, at regular intervals

10.1. Audit Initiation, Planning and Preparation


- 10.1.1.The Quality Management Representative prepares the Internal Audit Schedule at the beginning of every year.
- 10.1.2.The Quality Management Representative distributes the Internal Audit Schedule to both auditors and auditee.
- 10.1.3.The auditors and the auditee mutually arrange and agree on the audit details.
- 10.1.4.Auditor conducts a desk study (adequacy audit) and prepares working documents using the relevant Audit Checklist

10.2. Audit Performance

- 10.2.1.The Auditor visits the site and conducts an opening meeting.

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10.2.2.The Auditor conducts the compliance audit and records any non-compliance on the Non- conformance Report.

10.2.3.Note 2: A Non-compliance Report must be prepared for each non-conformity observed.

10.2.4.The auditor conducts the closing meeting during which:-

10.2.5.The auditee fills the "Proposed Corrective Action" section of the Non-conformance Report indicating the proposed corrective action and the implementation deadline.

10.2.6.The auditee signs the same section of the document.

10.2.7.A copy of the Non-conformance Report is left with the auditee for follow-up.

10.3.Follow Up and Review of Corrective Action

10.3.1.When the agreed implementation date arrives, the auditor checks to confirm that the corrective action has been effected and that the results are satisfactory.

10.3.2.The Auditor then fills and signs the "Review of Corrective Action" section of the report and audit is closed.


10.4.Reporting and Management Review

10.4.1.For each audit, all the Non-conformance Reports are summarized in the Audit Summary Report by the auditor.

10.4.2.The Auditor forwards the Non-conformance Reports and Audit Summary Report to the Quality Management Representative.

10.4.3. The Quality Management Representative reviews, signs the "Quality Management Representative's Comments" section of the Non-conformance Report and presents the Audit Summary Report to the Management Review Meeting.

10.4.4.During the Management Review Meeting, the audit report is discussed and the necessary actions taken.

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10.4.5.Minutes are recorded and distributed, not later than two weeks after the meeting, by the Quality Management Representative

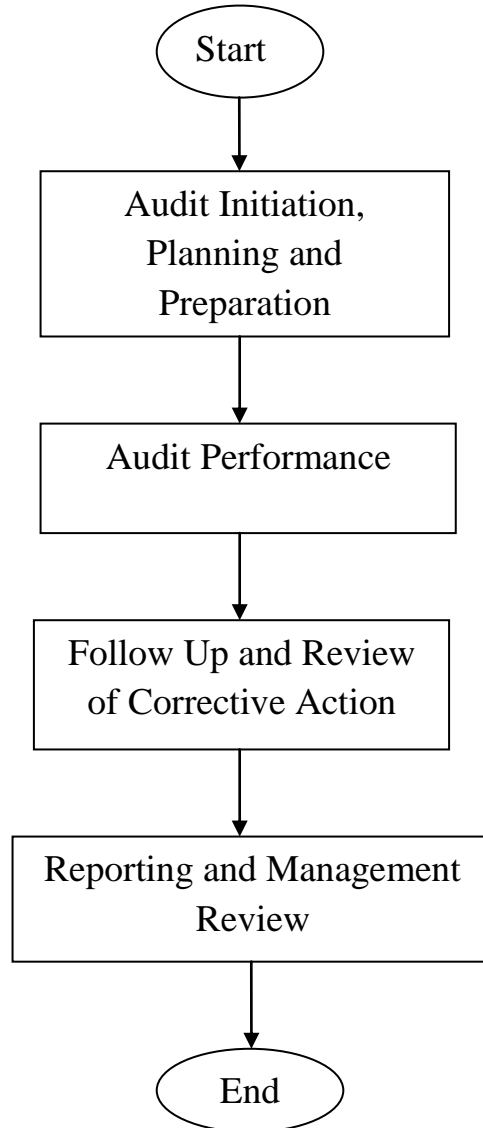
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11. PROCESS FLOW CHART



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APPENDIX

Appendix 1: Non Conformance Report Form (Ref: KFS/IA/FORM/001)

Department Audited/Department of Detection
ISO 9001:200815 Clause Covered

Auditor/Detector: _____ Auditee: _____

Auditor's/Detector's Report:

Name: _____ Signed: _____ Date: _____

Proposed Corrective Action:

Name: _____ Signed: _____ Date: _____

Review of Corrective Action:

Name: _____ Signed: _____ Date: _____

Quality Management Representative Comments:

Name: _____ Signed: _____ Date: _____

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Appendix 2: Internal Audit Schedule (Ref: KFS/IA/FORM/002)

Procedure Process	Audit Scope e.g ISO 9001(Clauses)	Audit No:	Date of Audit	Auditee	Auditee Name		DIVISION/ DEPARTMENT/ ZONE	
					HQS	FIELD		

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Appendix 3: Audit Checklist (Ref:KFS/IA/FORM/003)

Requirements	Observations/Comments	Results
Quality Management System		

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Appendix 4: Audit Summary Report Form (Ref:KFS/IA/FORM/004)

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Appendix 5: Audit Plan Report Form (Ref: KFS/IA/FORM/005)

Sec	Title	Div/ Dept/ Zone	Audit	Planned Audit												
				Annual	Biannual	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May

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