

# Internal Audit Policy

PHX036

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## Purpose

The purpose of the Internal Audit Policy is to establish guidelines for conducting internal audits of ISO standards within Phoenix. The policy aims to ensure compliance, identify areas for improvement, and enhance the effectiveness of our management systems.

## Scope

This policy applies to all standards implemented within Phoenix, including but not limited to ISO 9001 (Quality Management System), ISO 14001 (Environmental Management System), ISO 22301 (Business Continuity), ISO 20000 (Service Management System) and ISO 27001 (Information Security Management System)

## Policy Statement

Internal Audit Function:

- a. An independent internal audit function shall be established to evaluate the effectiveness and compliance of the Phoenix ISO management systems.
- b. The internal audit function shall be responsible for planning, conducting, reporting, and following up on internal audits.
- c. Internal auditors shall be impartial, competent, and have a reasonable understanding of the relevant ISO standards.

Audit Planning:

- a. Using a risk-based approach, internal audits shall be planned and scheduled, considering the criticality of processes and the effectiveness of controls.
- b. Audit objectives, scope, and criteria shall be defined prior to conducting the audit.
- c. Audit plans shall be communicated to relevant stakeholders, including auditees, in a timely manner.

Audit Conduct:

- a. Internal audits shall be conducted in a systematic and objective manner, adhering to auditing standards.
- b. Auditors shall collect and analyse evidence to assess the compliance, effectiveness, and efficiency of the ISO management systems.
- c. Auditees shall be given opportunities to provide inputs, clarify information, and address any concerns during the audit process.

Audit Reporting:

- a. Audit findings shall be documented accurately and objectively, including non-conformities, observations, and areas of improvement. Classification of findings are:

- **major non-conformity** - pertaining to a major deficiency in the Management System that shall be addressed by corrective action with urgency and without delay

- **minor non-conformity** – pertaining to a minor deficiency that shall be addressed by corrective action in a timely manner
- **Opportunity for Improvement (OFI)** – a suggestion for continual improvement that may or may not be selected to implement over an agreed period
- **positive findings** - findings that pertain to processes that go beyond what is required by the standard

b. Audit reports shall be issued promptly after the audit, clearly stating the findings, recommendations, and proposed corrective actions.

c. Reports shall be communicated to relevant management and stakeholders responsible for the audited processes.

#### Corrective Actions and Follow-up:

a. Auditees shall be responsible for developing and implementing corrective actions to address identified non-conformities.

b. The internal audit function shall verify and track the implementation of corrective actions through a follow-up process.

c. Management shall ensure timely resolution of non-conformities and monitor the effectiveness of corrective actions.

#### Continuous Improvement:

a. Audit findings and lessons learned shall be analysed to identify systemic issues, trends, and opportunities for improvement.

b. Management shall prioritize and implement actions to enhance the effectiveness of the ISO management systems based on audit results.

#### Compliance with Legal and Regulatory Requirements:

a. Internal audits shall assess the organization's compliance with applicable legal and regulatory requirements related to ISO standards.

b. Identified non-compliance shall be reported and addressed promptly.

This Internal Audit Policy shall be reviewed periodically to ensure its continued suitability, adequacy, and effectiveness.

## Version Control

<u>Author</u>	<u>Version</u>	<u>Date</u>	<u>Description</u>
ISC	1.0	04/08/2015	Original document
ISC	2.0	25/09/2018	Annual Review
ISC	3.0	01/04/2020	Annual Review
ISC	3.0	02/04/2021	Annual Review
ISC	3.0	18/07/2022	Annual Review
Geoff McGann	4.0	05/06/2023	Annual Review – Policy rewrite

## Document Approval

<u>Name</u>	<u>Version</u>	<u>Date</u>	<u>Position</u>
Sam Mudd	1.0	04/08/2015	Managing Director
Sam Mudd	2.0	25/09/2018	Managing Director
Sam Mudd	3.0	01/04/2020	Managing Director
Clare Metcalfe	3.0	18/07/2022	Operations Director
Clare Metcalfe	4.0	12/06/2023	Operations Director

Signed: *Clare Metcalfe* Clare Metcalfe, Operations Director

Dated: 12/06/2023