

#### **EMS AUDITS PROCEDURE**



Document Number:	OEQ-EMS-013	Reviewed By:	OEQ Senior Lead Auditor
Issue Date/ Effective Date:	5-18-11 / 5-18-11	Approved By:	Kris Sweckard
Revision Number:	4	Signature:	Kapl

#### 1.0 POLICY REFERENCE

- 1.1 Continual improvement of our environmental performance through proactive environmental management and self-assessments and/or third party assessments.
- 1.2 Utilization of Environmental Management System (EMS), as appropriate for our operations, to provide a framework for systematically reviewing and reducing our environmental footprint.

#### 2.0 PURPOSE

This document describes the procedure for planning, performing, and documenting periodic internal EMS audits of the City of Dallas (City) EMS program.

#### 3.0 SCOPE

This procedure applies to all City employees when engaged in City related work activities conducted within the EMS fence line.

#### 4.0 RESPONSIBILITY AND AUTHORITY

- 4.1 Senior Management (City Manager Office (CMO) and Directors) are responsible for the following: providing direction and committing resources for completing nonconformances resulting from audit findings.
- 4.2 **Department Directors** are responsible for participating and supporting the audit program and providing personnel to serve as internal EMS auditors.
- 4.3 Managing Director of the Office of Environmental Quality (OEQ) is responsible for:
  - 4.3.1 Approval of the audit plan

- 4.3.2 If necessary, resolving any disputed findings from the audit report
- 4.3.3 Periodically updating senior management regarding the status of the internal audit program and issued nonconformances.
- 4.4 **The Office of Environmental Quality** is responsible for developing, administering and maintaining the EMS audit program including:
  - 4.4.1 Maintaining relevant documents and records.
  - 4.4.2 Assigning and communicating roles and responsibilities to the auditors.
  - 4.4.3 Planning and directing EMS internal audits.
  - 4.4.4 Selecting and supervising EMS internal auditors.
  - 4.4.5 Preparing audit plans, audit tools and report generation.
  - 4.4.6 Verifying completed corrective actions/preventive actions requests.
  - 4.4.7 Evaluating audit trends to be included in EMS Sr. Management Reviews
  - 4.4.8 Designating the EMS Lead Auditors.
  - 4.4.9 Providing training for EMS internal audit team members.
  - 4.4.10 Preparing and reporting auditing findings and nonconformances to appropriate City staff and to the Managing Director of OEQ.
  - 4.4.11 Issuing nonconformances as recommended by the audit team.
- 4.5 **Senior Lead Auditor** is responsible for:
  - 4.5.1 The overall performance of the audit program
  - 4.5.2 Reporting the performance indicators selected for the audit program to City top management
  - 4.5.3 Day-to-day management of the audit program including ensuring that OEQ's responsibilities outlined in 4.4 are met.
- 4.6 EMS Lead Auditors are responsible for the following:
  - 4.6.1 Conducting the opening and closing meetings during the audit
  - 4.6.2 Guiding the audit team during the audit phase of the EMS internal audits
  - 4.6.3 Serving as the principal contact to the audited facility during the audit phase of the EMS internal audits.
  - 4.6.4 Consolidating audit findings received from the auditors
  - 4.6.5 Determining nonconformances, and observations

- 4.6.6 Planning audits
- 4.7 Auditors, including auditors-in-training, are responsible for the following:
  - 4.7.1 Supporting the EMS lead auditor including assisting in documenting opening and closing meetings
  - 4.7.2 Completing the audit through site investigations, document review, and interviews.
  - 4.7.3 Assisting in the determination of audit findings including recommending nonconformances.
- 4.8 Environmental Management Representatives (EMRs) are responsible for the following:
  - 4.8.1 Participating in audits conducted at their Department
  - 4.8.2 Supporting OEQ in conducting EMS internal/external audits
  - 4.8.3 Reviewing EMS auditing findings and determining corrective actions and preventive actions.
  - 4.8.4 Responding to and implementing corrective actions and preventive actions in the appropriate time frame.
  - 4.8.5 Tracking corrective actions and preventive actions and reporting implementation efforts to appropriate managers, supervisors and directors.
- 4.9 Facility Managers/Supervisors are responsible for the following:
  - 4.9.1 Providing appropriate resources, work space, and necessary documentation to support EMS audits.
  - 4.9.2 Participating in audits at their facility
  - 4.9.3 Supervising the timely completion of corrective actions.
- 4.10 **Department personnel/staff** is responsible for fully cooperating with internal auditors during the auditing process.

#### 5.0 AUDIT PROCEDURES

- 5.1 Determination of Audit frequency
  - 5.1.1 EMS internal audits are completed annually for all departments within the EMS fence line.
  - 5.1.2 EMS audits are conducted to review and determine if each element of the EMS is functioning as expected each year.

5.1.3 Audit frequency may be increased at the direction of the Managing Director of OEQ or when specifically requested by the City Manager's Office.

### 5.2 Audit Program Objective

#### 5.2.1 Audits are conducted to:

- 5.2.1.1 Determine whether the EMS conforms to the criteria of the ISO14001:2004 standard and the COD EMS procedures
- 5.2.1.2 Determine if the EMS has been properly implemented and maintained
- 5.2.1.3 Determine if the EMS is effectively achieving planned results
- 5.2.1.4 Provide information on the results of audits to management
- 5.3 The Office of Environmental Quality shall ensure that internal audits are conducted at planned intervals by developing an annual audit plan

#### 5.4 Selection of Auditors

- 5.4.1 In order to assure the objectivity and impartiality of the audit process, auditors cannot audit their own processes or processed over which they have responsibility.
- 5.4.2 Competency to perform audits is based on appropriate education, training, or experience. OEQ will utilize four grades of auditors when conducting internal EMS audits: Auditor-intraining, Auditor, Lead Auditor, and Senior Lead Auditor.

Table 1: Grades and Qualifications for Internal EMS auditors

Grade	Minimum Class Spec	Required Environmental Work Experience	Required Audit Experience	Required Certifications	Required Audit Training
Auditor-in- training	Environmental Coordinator-H or hold equivalent qualifications	One year	none	Must have or be able to obtain a 40-hour hazardous materials safety training certification within six (6) months of assignment.	Must complete the 5-day RABQSA- certified EMS Lead Auditor class within six (6) months of assignment
Auditor	Environmental Coordinator-H or	One year	20 audit days as part of an	40-hour initial and 8-hour refresher	Must have completed the 5-

Grade	Minimum Class Spec	Required Environmental Work Experience	Required Audit Experience	Required Certifications	Required Audit Training
	hold equivalent qualifications		audit team. The twenty audit days must include at least 4 complete audits.	hazardous materials safety training certification	day RABQSA- certified EMS Lead Auditor class
Lead Auditor	Environmental Coordinator-H or hold equivalent qualifications	Two years	Must have completed 35 audit days, with at least 7 complete audits, as part of an audit team. Must have completed at least 15 days and 3 complete audits leading the audit team or as a solo auditor.	40-hour initial and 8-hour refresher hazardous materials safety training certification. Must be a Certified Environmental Scientist (CES), Registered Environmental Manager (REM), or hold equivalent credentials. Must hold RABQSA certification grade "Environmental Auditor "or higher.	Must have completed the 5- day RABQSA- certified EMS Lead Auditor class
Senior Lead Auditor	Must be an Environmental Coordinator II-I or hold equivalent qualifications	Four years	Must have completed 35 audit days, with at least 7 complete audits, as part of an audit team. Must have completed at least 15 days and 3 complete audits leading the audit team or as a solo auditor.	40-hour initial and 8-hour refresher hazardous materials safety training certification. Must be a Registered Environmental Manager (REM) or hold equivalent credentials. Must hold RABQSA certification grade "Principal Environmental Auditor "or higher	Must have completed the 5- day RABQSA- certified EMS Lead Auditor class

### 5.5 Conduct of Audits

- 5.5.1 In order to assure the objectivity and impartiality of the audit process:
  - 5.5.1.1 Nonconformances must be based on evidence. The nonconformance report to the department will record the body of evidence associated with the finding.
  - 5.5.1.2 Records of the audit shall indicate evidence of conformance with the audit criteria.

- 5.5.1.3 Records will indicate what was audited, who was interviewed (by job description), and what documents and records were reviewed.
- 5.5.2 Audit activities will include documentation review, site tour, staff interviews, and observation of activities performed.
- 5.5.3 Internal EMS audits, where practicable, will include an opening meeting and a closing meeting.
  - 5.5.3.1 The closing meeting shall include reporting preliminary audit results to the representatives of the audited department.
- 5.6 Audit plans must consider:
  - 5.6.1 The environmental importance of the operations concerned. Consideration should be given to significant aspects, legal and other requirements to which the organization subscribes, and objectives and targets.
  - 5.6.2 The results of the previous audits including nonconformances and corrective and preventive actions.
  - 5.6.3 The size, locations, and organization of the department being audited.
- 5.7 Determination of audit criteria
  - 5.7.1 Collected evidence will be compared to the ISO14001:2004 standard, COD EMS procedures, and procedures developed by the departments to demonstrate conformance with ISO14001:2004 standard, COD EMS procedures, or the legal and other requirements to which the organization subscribes.
  - 5.7.2 MANDATORY REVIEW OF HISTORICAL FINDINGS: Every EMS audit will include an evaluation of the audited department's conformance with ISO 14001:2004 element "Nonconformity, corrective action and preventive action"
  - 5.7.3 The records of the audit will include the audit criteria. Audit records should indicate what evidence was collected for each of the audited criteria.
- 5.8 Determination of Audit scope

- 5.8.1 The audit scope defines the boundary of the audit. The audit scope generally includes a description of the physical locations, organizational units, activities and processes, as well as the time period covered.
  - 5.8.1.1 Tentative scope will be determined in the annual audit plan.
  - 5.8.1.2 Audit records shall indicate the actual scope of the audit.
- 5.9 Determination of Audit methods:
  - 5.9.1 Audit conformance and audit findings will be determined using sampling.
    - 5.9.1.1 Sampling should be representative of the scope of the audit.
    - 5.9.1.2 Audit records will indicate the actual information sampled.
  - 5.9.2 Methods of evidence collection include staff interviews, observation of activities, and documentation review.
  - 5.9.3 Audit records will document the methods used including any forms or audit tools developed in support of the audit process.
  - 5.9.4 **MANDATORY REVIEW OF HISTORICAL FINDINGS**: Every EMS audit will include a review of the audit findings from previous audits:
    - 5.9.4.1 Particular attention must be paid to the findings issued in the EMS audit from the previous fiscal vear.
    - 5.9.4.2 Open findings from the previous audit must be audited.
    - 5.9.4.3 Older findings are to be sampled at the discretion of the lead auditor.
- 5.10 Records for internal EMS audits shall be retained in accordance with COD documents and records management procedures.
- 5.11 Communication of audit results to management
  - 5.11.1 Preliminary findings will be communicated to the EMR as part of the closing of the audit.

- 5.11.2 The audit findings that indicate nonconformity will be communicated electronically to the EMR using Intelex.
- 5.11.3 Audit findings indicating the potential for future nonconformance (an observation) will be communicated electronically to the EMR using Intelex.

#### 6.0 RELATED DOCUMENTS

6.1	OEQ-EMS-008	Documents and Records Management
	Procedure	
6.2	OEQ-EMS-012	Nonconformity, Corrective/Preventative Action
	Procedure	•
6.3	OEQ-EMS-011	Monitoring and Measurement Procedure

#### 7.0 **DEFINITIONS:**

- 7.1 Internal Audit Systematic, independent and documented process for obtaining audit evidence and evaluating it objectively to determine the extent to which the environmental management system audit criteria set by the organization is fulfilled.
- 7.2 Audit tool a checklist, guide, or other document developed or compiled to assist the EMS audit team in obtaining and evaluating objective evidence consistent with the scope of an audit. Audit tools are not controlled. Any audit tools used in a specific audit are part of the audit record and are maintained and archived within the audit records.
- 7.3 EMS Auditor A qualified and trained individual who is authorized to perform specific EMS audit functions under the direction of a lead EMS auditor.
- 7.4 Lead EMS Auditor A qualified and trained individual, who is authorized to plan, organize, and direct EMS audits of City of Dallas departments and facilities
- 7.5 Non-Conformance Non-fulfillment of an ISO14001:2004 requirement.
- 7.6 Observation- an identified potential problem where no actual ISO14001:2004 nonconformity exists.
- 7.7 Conformance- meets the requirements of ISO14001:2004 or other stated criteria.
- 7.8 Objective evidence- policies, procedures, manuals, inspection checklists, operating logs, annual reports, and other documents and records; observations of practices, equipment, and facilities:

and interviews with key personnel, management, or contractors that objectively demonstrate conformance with the EMS criteria.

#### 8.0 CHANGE HISTORY-REVISION 4

- 8.1 (Revision 1) A complete rewrite of section 5.
- 8.2 (Revision 2) Replaced references to legal requirements with "legal and other requirements to which the organization subscribes".
- 8.3 (Revision 3) Updated "Reviewed by:" header field from "EMS Core Team" to "OEQ Senior Lead auditor"
- 8.4 (Revision 3) Deleted Rev. 2 clause 4.3.5. In Rev. 2, this was a typographic error.
- 8.5 (Revision 3) Deleted Rev. 2 clause 4.3.2 to reflect current OEQ responsibilities.
- 8.6 (Revision 3) Deleted Rev. 2 clause 4.4.7 to reflect current audit program.
- 8.7 (Revision 3) Deleted Rev. 2 clause 4.7.4. Training requirements are now in Table 1 under section 5.4.
- 8.8 (Revision 3) Updated clause 5.4.1 to allow for auditors to audit their own departments in specific cases.
- 8.9 (Revision 3) Updated clause 5.4.2. Removed the requirement for OEQ to certify competency of internal auditors. Added grades and qualifications for internal auditors in Table 1.
- 8.10 (Revision 3) Replaced references to "IsoSoft" with "Intelex" in section 5.11.
- 8.11 (Revision 3) Replaced all references to "Audit Team Members" with "auditors".
- 8.12 (Revision 3) Moved Rev. 2 section 4.5 "Environmental Management Representative" to section 4.8.
- 8.13 (Revision 3) Added "Senior Lead Auditor" at section 4.5
- 8.14 (Revision 3) Added "including Auditors-in-training" to section 4.7.
- 8.15 (Revision 3) Rev. 2 sections 4.8 and 4.9 are now sections 4.9 and 4.10.
- 8.16 (Revision 4) Changed "Director" to "Managing Director" in section 4.3
- 8.17 (Revision 4) Updated section 5.2.1. Added to 5.2.1 "and maintained". Added section 5.2.1.3 "Determine if the EMS is effectively achieving planned results. Rev. 3 section 5.2.1.3 is now Rev. 4 section 5.2.1.4,

- 8.18 (Revision 4)Updated section 5.7. "Determination of audit criteria" to include a **mandatory review of historical findings** (section 5.7.2).. Revision 3 section 5.7.2 is now revision 4 section 5.7.3.
- 8.19 (Revision 4) Updated section 5.9 "Determination of Audit methods" to include section 5.9.4 "MANDATORY REVIEW OF HISTORICAL FINDINGS"