

# Standard Operating Procedure (SOP)

## Internal Audits and Continuous Improvement Measures

This SOP details the process for **internal audits and continuous improvement measures**, focusing on systematic evaluation of internal processes, identification of non-conformities, implementation of corrective actions, and ongoing monitoring to enhance operational efficiency. The objective is to maintain compliance with industry standards, promote quality management, and foster a culture of continuous improvement within the organization.

### 1. Purpose

To outline the procedure for conducting internal audits, identifying improvement opportunities, and implementing continuous improvement measures to ensure process effectiveness and adherence to relevant standards and regulations.

### 2. Scope

This SOP applies to all departments, processes, and personnel involved in the management, execution, and oversight of internal audits and continuous improvement activities within the organization.

### 3. Responsibilities

Role	Responsibility
Audit Coordinator	Plans audits, assigns auditors, ensures execution, and monitors follow-up actions.
Auditors	Conduct audits impartially, document findings, and report non-conformities.
Department Managers	Facilitate audits, provide necessary information, and ensure corrective actions are implemented.
Process Owners	Address audit findings, execute improvement measures, and monitor their effectiveness.
Top Management	Support audit program, review audit outcomes, and allocate resources for improvements.

### 4. Procedure

- Audit Planning**
  - Prepare an annual audit schedule, covering all processes/areas as per risk assessment.
  - Assign qualified, independent auditors to ensure objectivity.
- Audit Preparation**
  - Review relevant procedures, previous audit reports, and applicable standards.
  - Develop audit checklists based on process requirements.
- Audit Execution**
  - Perform audit according to the schedule and checklist.
  - Interview personnel, review records, and observe processes.
  - Document findings, noting both conformities and non-conformities.
- Reporting**
  - Prepare and distribute the audit report to relevant stakeholders within 5 business days.
  - Highlight non-conformities, observations, and areas for improvement.
- Corrective Actions**
  - Responsible parties develop action plans to address non-conformities within 10 business days.
  - Implement corrective actions and document evidence of completion.
- Follow-up and Verification**
  - Audit Coordinator reviews effectiveness of corrective actions after implementation.
  - Re-audit as necessary to ensure issues are resolved.
- Continuous Improvement**
  - Analyze audit results and recurring issues to identify systemic improvement opportunities.
  - Share lessons learned and best practices across the organization.
  - Update standard procedures and training as needed.

### 5. Documentation and Records

- Audit schedules
- Audit checklists
- Audit reports
- Corrective action plans
- Evidence of corrective actions
- Follow-up and verification records

## **6. Review and Revision**

This SOP will be reviewed annually, or as needed, to ensure ongoing relevance and effectiveness.

## **7. References**

- ISO 9001:2015 - Quality Management Systems
- Organization's Quality Manual
- Relevant regulatory requirements

## **8. Appendix**

*(Optional: Attach templates for audit checklist, audit report, and corrective action form)*