ISO 17024 Internal Audit Guidance Document

How often?

An internal audit must be conducted annually for the first 1-2 rounds, and it can be done less frequently if earlier findings do not indicate a need for annual review (though generally this is a good practice).

Audits can be divided throughout the year and focus on one department or area at a time.

What is audited?

The internal audit is to be used to demonstrate ongoing compliance with the ISO 17024 standard in all departments that handle or provide service to the certification program(s).

Who conducts the audit:

The certification body can determine whether this is done with an external consultant or a knowledgeable individual from a different part of the organization, but it must be conducted by someone independent of the department being audited. This individual should sufficiently understand the requirements to be able to effectively conduct an audit and present findings.

Who participates in the audit?

All employees that handle certification, manage or train those employees, and adjunct services that support certification (like IT, storage, an outsourced services like exam development and administration)

Who reviews the audit?

There should be an assigned Quality Manager, and there needs to be top management commitment to quality management review, so findings should be reviewed and shared with the governing board, employees.

Audit Conducted by:_____ **Department:**_____ **Date(s):** ___/___/___ to ___/___/___

Audit results reviewed by: _____ **Title:**_____ **Date:** _____

Standard	Requirement	Departments Audited	mm/yy	Documents or processes reviewed	Findings
4.1	Evidence of legal status				
4.2	Responsibility for certification decision is not outsourced				
4.3	Management of impartiality Organizational structure • Balanced representation in governing body • Nondiscrimination and fairness in applying policies • Risk analysis on conflict of interest				
4.4	Financial sustainability – assets, sustainability				
5.1	Key responsibilities of personnel identified: o Operations o Maintenance of certification scheme o Implementation of P&P o Assessment activities o Finances o Resources				

	o Contracts o Scheme committee consultants Review of outsourced certification matters				

5.2	Certification and training
	firewalls and impartiality in all
	communications and materials
	• Review of proctors, board
	  members and education
	  and training conflicts				

6.1	Review of personnel resources (staff, board, contractors, SMEs, proctors) for currency • Sufficient? • Competencies defined Duties/responsibilities • Confidentiality agreements • Performance evaluations				
6.2	Management of conflict of interest • Qualification of examiners and proctors (invigilators) • Monitoring of performance				
6.3	Review of performance, monitoring of outsourced certification activities				
6.4	Review of non-personnel resources • Office space, exam sites • Hardware and software • Secure storage and backup				

7.1	Records control • Records retention policy • Storage • Disposal				
7.2	Review of publicly available information – accurate, current?				
7.3	Confidentiality agreements- candidates, internal and external personnel with access to exam materials				
7.4	Security • Exam development, administration • Storage, handling, disposal • Prevention of fraudulent exam practices • Proctor duties • Exam overexposure • Security breaches? • Monitoring of contractors				
8.1 – 8.2, 8.4, 8.5, 8.6	Review of certification scheme • Valid job analysis process and interval • Internal ownership				
8.3	Review of initial certification and recertification, and maintenance of certification requirements (including code of ethics and disciplinary actions)				
9.1	Review of application process				

	• Requirements, scope, fees, description of assessment • applicant rights • Duties of certificant • Accommodations • Process of review				
9.2 and 9.3	Assessment process • Exam development • Psychometric analysis • Standard setting • Exam administration • Accommodations • Translations? • Eligibility changes				
9.4	Review of process for making final certification decision				
9.5	Review of policy to suspend or revoke certification				
9.6	Review of recertification requirements for relevancy and to changes in industry				
9.7	Policy on use and misuse of certificates, logo, marks				
9.8	Review of appeals process for of adverse certification decisions – tracking and actions				
9.9	Complaints policy, tracking and actions taken (and by whom)				
10.2.3	Document control (internal and external – versions, modifications, responsibility)				
10.2.4	Records control - Naming,				

	storage, retention, disposal				
10.2.5	Management system review of internal and external audits • Review of appeals and complaints handling • Feedback from applicants, candidates, certificants, other stakeholders • Evidence of review of impartiality • Review of input and output • Progress on meeting objectives				
10.2.7	Corrective Actions • Identification of nonconformity (complaints, appeals, irregularities, interruptions, program operations problems) • Root cause analysis, determination of actions needed, implementation, and outcomes (did issue get fixed?)				
10.2.8	Preventive actions • Pre-emptive actions taken to mitigate or eliminate problems? • How to identify, what actions are taken, how they are implemented, • Review of outcome				