**QMS Quality Audit Process for UL professional Service Units**

# PURPOSE

The purpose of this document is to describe the various audit processes for UL professional service units[[1]](#footnote-1). Audits are a reliable mechanism through which the effectiveness of a Quality Management System (QMS) is systematically reviewed for the benefit of the department. An audit is a valuable tool that also allows a department to evaluate its own processes to assure the continual improvement of its QMS. The overriding priority of the audit process is to assist departments in taking full advantage of the benefits of the QMS. The spirit of the process is supportive. It is designed to help departments help themselves.

# RESPONSIBILITY

The Quality Officer, Quality Support Unit has overall responsibility for this process.

# PROCEDURE

## Types of Audits

There are currently three types of audit. For the purpose of this process, the following terms will apply:

* **Self-Audit:** Under the UL Framework, each unit is expected to conduct periodic “self-audits/assessments[[2]](#footnote-2)” of their QMS. Outcomes from these audits are incorporated into the department’s quality improvement plan.
* **QMS Audit:** This is an audit carried out by a panel of trained auditors, some from outside of the department being audited. This audit is focussed on the department’s documented QMS and on its key business processes. These audits assist professional service units in preparation for their review. (See Section 4 below for further details.)
* **Gap Analysis:** This is an audit conducted by the Unit, typically one year prior to the department’s Quality Review. The [UL QMS Framework](http://www.ul.ie/quality/quality-management-systems) documents are used to ascertain the unit’s progress to date in developing their QMS and to identify areas which need to be improved. The outcome of this gap analysis can be a very valuable first step in preparation for the quality review. (See Section 5 for further details.)

# 2. Auditors

## 2.1 Selection and Training of Quality Auditors

Professional Service Units in UL are encouraged to have a number of trained quality auditors. Each unit is required to nominate at least two members of staff to form the University panel of QMS (inter-department) auditors. Nominations will be requested by the QSU prior to each cycle of quality reviews. Each unit will also appoint a quality team leader for the duration of the review cycle – this is often a member of the management team. The QSU will maintain a register of auditors and quality team leaders.

Auditor training is scheduled by the Quality Support Unit as required.

## 2.2 Role and Responsibilities of Auditors participating in QMS Audits

During the review cycle, auditors will be required to participate in the QMS audit of at least one other support unit in UL. The audit schedule will be compiled by the QSU and communicated to the panel of auditors. QMS audits will be conducted as required throughout the 7-year cycle. Typically, auditors can expect to be involved in one QMS audit of another unit each year.

## 2.3 Confidentiality

Auditors must exhibit the highest level of professional objectivity and discretion in gathering, evaluating, and communicating information about the activity or process being audited. Complete confidentiality must be maintained at all times. Auditors must make a balanced assessment of all the relevant circumstances and not be unduly influenced by their own interests or by others when documenting the audit findings and writing the audit report.

# 3. The Audit Schedule

Each professional service unit is encouraged to participate in the inter-department audit process prior to their quality review. The QSU will assist in arranging ~~for~~ these audits and will liaise with the panel of auditors to schedule dates/times to suit the unit. A full schedule of QMS audits will be maintained by the QSU. Self-audits are conducted by the unit themselves and would typically cover operational procedures and working guidelines.

A gap analysis audit (using the QMS benchmark document) will normally be conducted by the unit about 12 months prior to their quality review .

A site has been created on [SharePoint Portal](https://ulcampus.sharepoint.com/sites/QSUnit/QMS%20Audit%20Team/Forms/AllItems.aspx) to act as a central repository of information for QMS inter-department auditing.

# 4. The QMS Audit Procedure

# 4.1 Preparing for the Audit

* The Quality Officer will meet with the departmental quality team leader approximately one month before the audit, for planning purposes. In consultation with the quality team leader, the Quality Officer will select a minimum of 2 auditors from the panel to assist in the audit. A minimum of two auditors from the unit will also be used.
* The quality team leader will provide all relevant documentation to the Quality Officer (Quality Manual, procedures & supporting documentation) approximately 3 weeks before the audit.
* The Quality Officer will meet with the nominated auditors to pass on the documentation and discuss roles to be performed during the audit (at least 2 weeks before the audit).
* The lead auditor will then liaise with the relevant units to schedule preferred dates/times for the audit. Auditors should also familiarise themselves with the Auditing Process and the UL ‘[QMS Framework.](http://www.ul.ie/quality/quality-management-systems)’
* Auditor(s) will use the documented procedures provided by the department to prepare a list of questions to be used during the audit. It is important that all elements of the quality management system as well as the individual departmental procedures are included in the list. Auditors should ensure that the QMS principles are evident throughout the key business processes (e.g. leadership, customer focus, engagement of people, continual improvement, evidence-based decision making, etc.).
* A template for the audit checklist is available from the Quality Support Unit.

The following information should be included on all audit checklists:

* Date of audit
* Name of the auditors
* Name of the unit being audited and the auditee(s)

# 4.2 The Actual Audit

Auditors should ensure that all elements of the QMS are reviewed during the audit, as well as the key business processes of the unit. Typically, a QMS audit will take approximately one hour. The objective of the audit is to help units help themselves. The audit is a facilitative process which assists units in taking full advantage of the benefits of their QMS.

**Opening Meeting:** Introductions should be made during the opening meeting and the auditor(s) should outline the structure and scope of the audit and emphasise that it is the unit’s process and not the person that is being audited.

**The Audit Trail:** Auditors should bring a copy of the procedures they are auditing along with the prepared questions on their checklist. The following should be discussed during the audit:

* Show me how….(objective evidence);
* Ascertain whether the procedure is effective, reliable and efficient;
* Invite auditees to make suggestions for improvement;
* Ensure QMS principles are evident throughout all business processes.

The auditor must ensure that every element of the QMS is reviewed during the audit and particular attention will be paid to the unit’s Quality Manual.

**Closing Meeting:** Before the audit concludes, review the main issues arising from the audit. Reach consensus of opinion regarding what is and is not an issue. Only audit findings that have been agreed should be included in the audit report. Auditors should acknowledge the time given by the unit and the support and assistance given during the audit.

# 4.3 Following an Audit

On completion of the audit, the Quality Officer will take responsibility to ensure completion of the audit report. The audit report should clearly outline any recommendations for improvement resulting from the audit, as well as commendations. These will have previously been discussed at the closing meeting. A template for the Audit Report is available as a form on the [QSU website](http://www2.ul.ie/web/WWW/Services/Quality/Support_Departments/Quality_Review_Process).

This report is sent electronically to the Director of the unit and the quality team leader, normally within 3-4 days of the audit, and a copy is sent to the QSU. A copy of individual audit reports should also be given to the auditee. All other documentation, including the paper trail, is given back to the unit for shredding. Action items arising from the audit are recorded by the unit and included in their quality improvement action plan.

# 5. Gap Analysis

Approximately 12 months before their review date, the unit will conduct a gap analysis of their QMS. The self-evaluation questions outlined in the UL QMS Framework documents can be used to ascertain the department's progress to date in implementing an effective quality management system and to outline areas which may need to be improved.

Audit findings from the gap analysis should be incorporated into the department’s Quality Improvement Action Plan. The outcome of this audit can be used to serve as a gap analysis in preparation for the quality review and incorporated into the self-assessment report required for quality review

# 6. The Quality Review Process

The [Quality Review Process](http://www2.ul.ie/web/WWW/Services/Quality/Support_Departments/Quality_Review_Process) for professional service units comprises the following three key stages:

The review process has three distinct phases:

1.   Pre-review phase, which includes:

i. A gap analysis conducted by the unit

ii. A self-evaluation exercise conducted by the unit

iii. The production of a self-assessment report (SAR) by the unit

iv. Inter-department audits administered by the QSU.

2.   Review phase: An onsite, three-day review of the unit by the visiting QRG, culminating in the production of a QRG report

3.   Post-review phase, which is recorded in a quality improvement plan (QIP) template document. Stages in this phase include:

i. Consideration of QRG report by unit and formulation of a formal response

ii. Approval by Quality Committee for publication of QRG report and consideration of unit response

Iii. Circulation of quality improvement plan by QSU to unit for implementation

iv. Ongoing implementation of recommendations

v. Interim progress report to Quality Committee

vi. Implementation review meeting

vii. Publication of progress report by QSU on website

The review process is described in detail in the [Quality Review Process for Support Units: Guidelines and QMS Framework](http://www.ul.ie/quality/sites/default/files/docs/Support%20Guidelines%20Rev%201_0.pdf) document.

# documentation

The following documents are relevant to this process:

* Register of auditors and quality team leaders;
* Audit Schedule
* Quality Management System – [Frameworks](http://www.ul.ie/quality/quality-management-systems) for Professional service units;
* Audit Checklist Template;
* Audit Report Template;
* Quality Review Process for professional service units;

# Records

The following audit records are held:

* Self-Audits: These records are held by the department for a minimum of three years.
* QMS Audits: QMS audit records and audit paper trails are held by the department for a period of at least 3 years. Copy audit reports are also maintained by the Quality Support Unit.
* Quality Reviews: Records are held by the Quality Support Unit for a period of at least 7 years (retain until superseded to comply with the University [Records Management Policy](https://www.ul.ie/policy-hub/sites/policyhub/files/user_media/documents/RecordsManagement%26RetentionPolicy_2019.pdf).

# PROCESS VERIFICATION

Evaluation of process effectiveness is carried out using feedback from the panel of trained auditors and also by the audit process itself.

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| **Revision No.** | **Date** | **Approved by:** | **Details of Change** | **Process Owner** |
| 1 | Nov ‘12 | ART / KOM | Initial Release | Quality Support Unit |
| 2 | Jan ‘13 | ART / KOM | Minor edits | QSU |
| 3 | Mar ‘13 | ART / KOM | Major review to differentiate between different types of audits | QSU |
| 4 | Oct ‘13 | ART / KOM | Slight modification to procedure layout to conform to standard template | QSU |
| 5 | Nov ‘13 | ART / KOM | Modified following feedback from QMS auditor training session and Library audits. | QSU |
| 6 | Aug ‘14 | ART / KOM | Modified to include UL logo – requirement for UL web policy | QSU |
| 7 | Apr ‘16 | Gary Walsh | Modified to coincide with revised guidelines. Recommendations from internal audit (22 Mar) also included. | Kim O’Mahony |
| 8 | Mar ‘17 | Gary Walsh | Minor modifications following audit recommendations. Also updated hyperlinks | Kim O’Mahony |
| 9 | Mar ‘18 | Gary Walsh | Changes to Gap Analysis section, which is now completed by the Unit. Minor modifications. | Kim O’Mahony |
| 10 | Apr ‘20 | Director of Quality | Minor updates following process review by QSU | Quality Officer |

**Figure 1: Overview of Quality Audit Process**

**Quality Improvement Plan**

- Continually updated

- Reviewed during QMS audits

1. Units can mean division, department, unit or section. [↑](#footnote-ref-1)
2. Self-audits are sometimes called a “ an internal audit” but that name can cause confusion with the mandatory Internal Audit process performed by UL Internal Auditor and scheduled by the Corporate Secretary to meet with regulatory requirements. [↑](#footnote-ref-2)