CCSD Management Process System (MPS) Quality Policy

“The Clark County School District Office of the Superintendent is committed to quality performance by providing services and products to all District entities through a continual improvement process in support of the District’s strategic plan.”
# Table of Contents

<table>
<thead>
<tr>
<th>Page Number</th>
<th>Section Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Welcome</td>
</tr>
<tr>
<td>4-8</td>
<td>Eight Quality Principles</td>
</tr>
<tr>
<td>9</td>
<td>The Audit Process (Plan, Do, Check, Act)</td>
</tr>
<tr>
<td>11</td>
<td>Tools you will Use</td>
</tr>
<tr>
<td>12</td>
<td>The Role of the MPS Auditor</td>
</tr>
<tr>
<td>14</td>
<td>Planning the Audit</td>
</tr>
<tr>
<td>19</td>
<td>Opening Meeting/Starting the Audit</td>
</tr>
<tr>
<td>20</td>
<td>Interviewing</td>
</tr>
<tr>
<td>21</td>
<td>Auditee Reactions</td>
</tr>
<tr>
<td>22</td>
<td>Identifying Nonconformities’</td>
</tr>
<tr>
<td>23-28</td>
<td>21 Elements</td>
</tr>
<tr>
<td>29</td>
<td>Interviewing Staff Members</td>
</tr>
<tr>
<td>29</td>
<td>Recording Nonconformance’s</td>
</tr>
<tr>
<td>30</td>
<td>Reporting Process Corrective Action (PCA) Information</td>
</tr>
<tr>
<td>30</td>
<td>Completing the Department Process Audit Checklist</td>
</tr>
<tr>
<td>31</td>
<td>Closing Meeting</td>
</tr>
<tr>
<td>32</td>
<td>Concluding the Audit</td>
</tr>
<tr>
<td>32</td>
<td>Closing Remarks</td>
</tr>
</tbody>
</table>
Welcome

Welcome and thank you for your time and dedication in making the Clark County School District (CCSD) a better place.

- The information you are about to receive is based on years of careful study and experience gained during actual audits at the CCSD and other school districts.

- This course guide is intended to help you develop a basic understanding of the CCSD Management Process System (MPS) process auditing system and basic auditing techniques which will assist you in developing your auditing skills.

- You are encouraged to ask questions and join in open discussions.

From the Top

Role of the ISO 9001:2008 Management Representative

In 2001, the Clark County School District opted to use the International Organization for Standardization (ISO) requirements for a quality management system to address the organizational needs of our District. Since 2003, the District received its first certification to the standards of ISO 9001:2000 and received recertification in February 2007. ISO is making a positive difference in the way we do business within the organization.

In our efforts to continue to train staff and implement process management in the District, Maureen Fox, management representative has the responsibility to:

- Ensure processes needed for the quality management system are established, implemented, maintained, and communicated throughout the organization.

- Report to the Superintendent of Schools and the Executive Cabinet on the performance of the quality management system.

In our efforts to expand this program throughout the operational areas of the District, I ask staff in those areas to work with Mrs. Fox and the Management Process System team.

My thanks to all staff members who have participated in attaining accreditation to this rigorous international standard. I look forward to hearing of the successful implementation by departments as they attain certification status.

Walt Rulffes
Superintendent
Eight Quality Principles

A quality management principle is a comprehensive and fundamental rule/belief for leading and operating an organization, aimed at continually improving performance over the long term by focusing on customers while addressing the needs of all other stakeholders’. Below we have provided the eight quality principles and examples of their application.

**Principle 1 – Customer Focused Organization**: Organizations depend on their customers and, therefore, should understand current and future customer needs, meet customer requirements and strive to exceed customer expectations.

**Steps in the application of this principle are:**

1. Understand customer needs and expectations.
2. Ensure a balanced approach among customers’ and other stakeholders’ (owners, people, suppliers, local communities, and society at large) needs and expectations.
3. Communicate these needs and expectations throughout the organization.
4. Measure customer satisfaction and act on results.
5. Manage customer relationships.

**Principle 1 Notes:**

---

**Principle 2 - Leadership**: Leaders establish unity of purpose and direction of the organization. They should create and maintain the internal environment in which people can become fully involved in achieving the organization’s objectives.

**Steps in the application of this principle are:**

1. Be proactive and lead by example.
2. Understand and respond to changes in the environment.
3. Consider the needs of all stakeholders including customers, owners, people, suppliers, local communities, and society at large.
4. Establish a clear vision of the organization’s future.
5. Establish shared values and ethical role models at all levels of the organization.
6. Build trust and eliminate fear.
7. Provide people with the required resources and freedom to act with responsibility and accountability.

8. Inspire, encourage, and recognize people’s contributions.

9. Promote open and honest communication.

10. Educate, train, and coach people.

11. Set challenging goals and targets.

12. Implement a strategy to achieve these goals and targets.

**Principle 2 Notes:**

**Principle 3 - Involvement of People:** People at all levels are the essence of an organization and their full involvement enables their abilities to be used for the organization’s benefit.

**Steps in the application of this principle are:**

1. Accept ownership and responsibility to solve problems.

2. Actively seek opportunities to make improvements, enhance competencies, knowledge, and experience.

3. Freely share knowledge and experience in teams.

4. Focus on the creation of value for customers.

5. Be innovative in furthering the organization’s objectives.

6. Improve the way of representing the organization to customers, local communities, and society at large.

7. Help people derive satisfaction from their work.

8. Make people enthusiastic and proud to be part of the organization.

**Principle 3 Notes:**
**Principle 4 - Process Approach**: “A desired result is achieved more efficiently when related resources and activities are managed as a process.”

**Steps in the application of this principle are:**

1. Define the process to achieve the desired result.
2. Identify and measure the input and output of the process.
3. Identify the interfaces of the process with the functions of the organization.
4. Evaluate possible risks, consequences, and impacts of processes on customers, suppliers, and other stakeholders of the process.
5. Establish clear responsibility, authority, and accountability for managing the process.
6. Identify internal and external customers, suppliers, and other stakeholders' of the process.
7. When designing processes, consider process steps, activities, flows, control measures, training needs, equipment, methods, information, materials, and other resources to achieve the desired result.

**Principle 4 Notes:**

---

---

**Principle 5 - System Approach to Management**: Identifying, understanding, and managing a system of interrelated processes for a given objective improves the organization’s effectiveness and efficiency.

**Steps in the application of this principle are:**

1. Define the system by identifying or developing the processes that affect a given objective.
2. Structure the system to achieve the objective in the most efficient way.
3. Understand the interdependencies among the processes of the system.
4. Continually improve the system through measurement and evaluation.
5. Estimate the resource requirements and establish resource constraints prior to action.

**Principle 5 Notes:**

---

---
**Principle 6 - Continual Improvement:** Continual improvement should be a permanent objective of the organization.

**Steps in the application of this principle are:**

1. Make continual improvement of products, processes, and systems an objective for every individual in the organization.

2. Apply the basic improvement concepts of continual improvement.

3. Use periodic assessments against established criteria of excellence to identify areas for potential improvement.

4. Continually improve the efficiency and effectiveness of all processes.

5. Promote prevention-based activities.

6. Provide every member of the organization with appropriate education and training on the methods and tools of continual improvement, such as the Plan-Do-Check-Act model.

7. Establish measures and goals to guide and track improvements.

8. Recognize improvements.

**Principle 6 Notes:**

**Principle 7 - Factual Approach to Decision Making:** Effective decisions are based on the analysis of data and information.

**Steps in the application of this principle are:**

1. Take measurements and collect data and information relevant to the objective.

2. Ensure that the data and information are sufficiently accurate, reliable and accessible.

3. Analyze the data and information using valid methods.

4. Understand the value of appropriate statistical techniques.

5. Make decisions and take action based on the results of logical analysis balanced with experience and intuition.

**Principle 7 Notes:**
**Principle 8 - Mutually Beneficial Supplier Relationships**: An organization and its suppliers are interdependent, and a mutually beneficial relationship enhances the ability of both to create value.

*Steps in the application of this principle are:*

1. Identify and select key suppliers.

2. Establish supplier relationships that balance short-term gains with long-term considerations for the organization and society at large.

3. Create clear and open communications.

4. Initiate joint development and improvement of products and processes.

5. Jointly establish a clear understanding of customers’ needs.


7. Recognize supplier improvements and achievements.

**Principle 8 Notes:**

---

**What am I looking for?**

- You are looking for evidence implementation of the eight quality principles is being applied.

**Notes:**

---

**How do I find it?**

- You will discover this through the interviewing process, general observation, and the gathering of evidence while visiting the department and those who work within it.

**Notes:**

---
The Audit Process

- The Plan, Do, Check, and Act (PDCA) model is an important part of the audit process.

- The PDCA model assists in ensuring all phases of the auditing process are accomplished; it also helps coordinate continuous improvement efforts.

- It both emphasizes and demonstrates that improvement efforts must start with careful planning, must result in effective action, and must move on again to careful planning in a continuous cycle.

- As an MPS process auditor, not only do you use this model, but you should be examining if the department you are auditing is also using this model.

Listed below are the steps to the model.

<table>
<thead>
<tr>
<th>Notes:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**PLAN** and write down what you want to accomplish.

**DO** what you planned on doing.

**CHECK** the result of what you did to see if the objective was achieved.

**ACT** on the information – standardize or plan for further improvement.

**What are you looking for?**

- You are looking for evidence of implementation of the PDCA model and its application within the department.

**How do you find it?**

- You will discover this through the interviewing process, general observations, and gathering of evidence while visiting the department and those who work within it.

<table>
<thead>
<tr>
<th>Notes:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
It is important to apply the PDCA model (figure A) to the process of auditing. In the following pages the PDCA model has been applied to the MPS auditing process to further assist you in both auditing and better understanding the model.

(Figure A)
Tools you will Use

The primary references you will use to conduct an audit are as follows:

- Eight Quality Principles
- Plan, Do, Check, Act model
- ISO 9001:2008 Quality Management System requirements
- ISO 9004:2000 Guidelines for Performance Improvement
  [http://ccsd.net/mps/links.phtml](http://ccsd.net/mps/links.phtml)
- Department Process Audit Checklist (AUD-F002)
- Gap Analysis Checklist (MPS-F014)

You are encouraged to review all publications and refer to them when a question of conformance arises.

Terms & Definitions

- **Non-conformity** – a failure to comply with a requirement of the management system and/or ISO Standard.
- **OFI** – Opportunity for Improvement – An opportunity for improvement, discovered during an audit, refers to a potential problem or improvements that could be made even though an actual non-conformance was not found.
- **PCA** – Process Corrective/Preventive Action – (Corrective Action, Preventive Action, Opportunity for Improvement)
- **Corrective Action** – corrective actions are steps that are taken to remove the causes of an existing non-conformity or to make quality improvements. Corrective actions address actual problems. In general, the corrective process can be thought of as a problem solving process.
- **Preventive Action** – preventive actions are steps that are taken to remove the causes of potential nonconformities or to make quality improvements. Preventive actions address potential problems, ones that haven’t yet occurred.
The Role of the MPS Auditor

- Catalyst
- Management instrument
- Interface with suppliers, customers and colleagues
- Consultant

Notes:

Qualifications

- Education
- Experience
- Professional competence
- Training
- Proficiency

Notes:

Characteristics

- Good communication skills
  - Oral
  - Written
  - Good Listening Skills
- Tact
- Flexibility
- Persistence
- Objectivity
- Integrity
- Self Confidence

Notes:
Using the Checklists

- Checklists are a VERY important part of preparing for the audit:
  - Serve as an audit guide
  - List areas to investigate
  - List questions to ask
  - Show evidence of planning
  - Keep you focused
  - Maintain pace and direction
  - Minimize bias
  - Reduce work during the audit

Notes:

_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
PLANNING THE AUDIT

- The information in section I of the audit checklist will assist the auditor in developing the audit plan.

- This area provides 11 steps which must be followed in order to properly plan for the audit.

**Step 1 - Scheduling**

Upon receiving the audit assignment and the previous audit file from the MPS office, contact the assigned department representative to schedule audit time(s) to meet with the department leadership. In the space provided below record the information.

<table>
<thead>
<tr>
<th>Department Contact Information</th>
<th>Name ___________________________ Title ___________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Meeting information</td>
<td>Date</td>
</tr>
</tbody>
</table>

- The MPS office assigns audit partners, department being audited and the audit date.

- You and your partner confirm the audit start time with the department contact person.

- You and your partner choose procedures to examine (Step 3).

- You and your partner set a time ahead of the audit to meet and plan for the audit.

**Notes:**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

**Step 2 - Organizational Chart (Not older than six (6) months)**

- When scheduling the audit time with the department representative, request a copy of the department or division's organizational charts, mission statement, and measurable objectives.

**Note:** If a division has one (1) mission statement for all their departments that is acceptable.

**Notes:**

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Step 3 - Choosing Procedures to Examine

Review the previous audit file received from the MPS office. Locate the department’s documented procedures or department manual on the MPS website, and choose a different procedure(s) then what was audited previously. http://ccsd.net/mps/procedures.phtml.

- Choose which procedure(s) you plan on auditing and record the document number, title, and date in the space provided below. Print the document(s) and bring with you to the audit.

<table>
<thead>
<tr>
<th>Document Number:</th>
<th>Document Title:</th>
<th>Document Date:</th>
<th>Revision:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Does the procedure(s) you have chosen to audit contain the elements as prescribed by the CCSD MPS? (Refer to page 7 of 25, question 11 CCSD Gap Analysis Checklist.)
  
  o  Response and objective evidence:
    Yes  No (issue a process corrective action request)
  
  Opportunity for Improvement

  
  ____________________________________________________________________________

  
  ____________________________________________________________________________

- During the audit, review the chosen procedure with the appropriate staff member. Have that person walk you through the procedure. Record staff member’s name(s) in section 3, page 9 of 13 in the Process Audit Checklist (AUD-F002).

Notes:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Step 4 - Review Measurable Objectives

- Review the measurable objectives. (Refer to section 2, question 3, page 3 of 13 Process in the Process Audit Checklist AUD-F002)

Notes:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
Step 5 - Choosing Areas to Examine

- Review the organizational chart and define the area(s) of leadership, management/supervisor, and staff within the scope of audit that you would like to examine. Record the names of the leadership under Step 8, page 2 of 13, and record the names of the management under Step 9, page 2 of 13. During the course of the audit, randomly select three staff members, record their names in Section 3, page 9 of 13, and ask each staff member questions 1 through 6, on pages 9 through 11.

Notes:

Step 6 - Review Previous Audits

- Review the department's previous audit. (You will receive the file prior to the audit from the MPS office.)

- Were there any prior opportunities for improvement (OFI) or non-conformances found?
  - Yes
  - No

- If yes, during the audit, verify if there is evidence the department has taken action to correct the OFI and/or non-conformance?
  - Response and objective evidence:
    - Yes
    - No (issue a process corrective action request)

Opportunity for Improvement

Notes:

Step 7 - Areas to be Examined

There are three areas in the organization that must be examined, Leadership (L1), Management/Supervisor (M2), and Staff (S3).

Leadership L1 -

- Who represents leadership is often dependent on how the department/area under examination is structured.

- In most cases, leadership will be represented by the director of the department or area under examination.
• Since not all areas may have someone under the title of director, the person who oversees operations is most likely the best candidate to start with.

• These candidates will be required to answer all 21 elements provided in AUD-F002. If you have questions as to where you should start, contact the lead auditor.

Management M2 -

• In most cases, the employees in area of middle management/supervision are directed to report to leadership and have the responsibility of overseeing the specific areas which you have chosen to examine.

• These individuals will be required to answer elements 1 through 5 and any additional elements you would like to ask from the remaining 16 elements (not all 21 elements are required).

• The purpose here is to check for evidence of leadership’s implementation and communication through the different layers of the organization. If you have questions as to where you should start, contact the lead auditor.

Staff S3 -

• As the audit progresses, you will discover the audit trail leading towards all levels of the department where staff members are located and most likely have a direct interface with the department’s customer.

• Section 3 of AUD–F002, provides a series of elements which will be asked of three department staff members within the scope of the audit.

• Keep in mind the staff members who are interviewed must be within the scope of the audit and should not be newly hired to the department.

• Record the names of the staff members you interviewed and record their answers in the provided areas.

• The purpose is to check for evidence of leadership’s and management’s implementation and communication efforts throughout the different layers of the organization.

• If you have questions as to where you should start, contact the lead auditor.

Notes:
Step 8 - Interviewing Leadership

All 21 elements provided in the Process Audit Checklist (AUD-F002) must be asked of the Leadership (L1). Record name(s) of the leadership representative you spoke with in the space provided.

<table>
<thead>
<tr>
<th>Leadership Name:</th>
<th>Title:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**NOTE:** Inform the leadership representative of the area(s) you plan on visiting during the audit and request to meet with the appropriate manager/supervisor(s).

Step 9 - Interviewing Management/Supervision and Staff

Management/Supervisor (M2) must be asked elements 1 through 5. In addition you may select any of the remaining elements in this checklist. Ensure there is sufficient evidence of communication and information flow among Leadership (L1) and Management/Supervisor (M2).

<table>
<thead>
<tr>
<th>Management/Supervisor Name:</th>
<th>Title:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**NOTE:** Inform the manager/supervisor of the areas you plan on visiting during the audit and request to meet with the appropriate staff member(s) who can walk you through the procedures you have chosen to audit. Record staff names and their responses on page 9 and 10.

**Notes:**

---

Step 10 - Closing the Audit

Upon completion of the audit, if you have not completed the Audit Summary, inform L1 representative that the audit summary will be provided within two to three business days. In addition conduct a closing meeting with leadership and provide feedback concerning the audit.

**Notes:**

---

Step 11 - Audit Summary Report

Upon completion of the audit summary, submit the original to the MPS office and a copy to the department leadership.
Opening Meeting/Starting the Audit

• Purpose – introductions, sign in sheet, start audit.
• Investigate as needed; then move on.
• Do not try to find problems (but do not ignore them either).
• Assume compliance unless objective evidence shows otherwise.

Notes:

Gathering Evidence

• Use your checklist
• Decide how to handle potential audit trails:
  o Disregard
  o Note for later
  o Follow-up at the time
  o If unsure, call Janette Scott @ 799-6360 ext. 5070
• Be sure evidence is objective – hearsay is not acceptable for identifying non-conformities
• Talk with the right people
• Ask the right questions
• Stay focused
• Maintain direction and control
• Establish and agree on the facts
• Verify your understanding:
  o Restate it
  o Check multiple sources (individuals, documents, and records)
  o Be observant
  o What is the extent of the problem?
Interviewing

- Ask open-ended questions
- Use silence
- Act dumb
- Be like an investigative reporter
- Auditor’s demeanor
  - Professional and efficient
  - Use conversational tone
  - Practice good listening skills
  - Maintain same eye level
  - Develop rapport

Notes:

---

Interviewing in Teams

- One auditor takes the lead “speaking” role
- The other auditor:
  - Watches, listens, takes notes
  - Keeps to the schedule
  - Corroborates findings
  - Offers expertise
  - Is impartial
  - Can ask follow-up or clarifying questions
Interviewing and Taking Notes

- Notes should identify:
  - Admissible statements
  - Document identifiers
  - Positions and names of interviewees

- What:
  - Recording findings of nonconformities
  - Evidence of those nonconformities

- How:
  - Do not appear to ignore the interviewee
  - Refer to what you are investigating now and later
  - Make notes legible and complete

**Notes:**

---

**Auditee Reactions**

- Tries to enlist your help
  - Use your judgment whether to assist or tactfully decline

- Challenges your findings
  - Cite the facts
  - Acknowledge your mistake, if applicable

- Volunteers information
  - Use judgment to decide if it is worth investigating
  - Try to distinguish between a “cry for help” and a distraction
• Tries diversionary tactics
  o Maintain your control
  o Keep the audit on schedule

• Perceived conflict
  o Assure the auditee that no blame is sought
  o Reinforce the benefits of the audit process

• Perceived authority
  o Be diplomatic and patient
  o Respect their authority

Identifying Nonconformities

• What constitutes nonconformity?
  o When an issue or circumstance does not correspond with the management system. (i.e. the 21 elements)
  o When the management system does not comply with ISO standards.

• Establish the facts to decide if nonconformity exists
  o Observation of the facts
  o Why the facts constitute a nonconformity
  o Who provided the information
  o Where the nonconformity was found

Notes:
21 Elements

Now that a plan has been developed between all concerned parties, it is time to actually **DO** the audit as planned.

- The following elements have been derived from five years of previous external and internal audits and are based on the requirements of ISO 9001:2008 and the guidelines provided in ISO 9004:2000.

- Each question is titled with the areas under examination and the requirements from which it was derived to include the reference page in the CCSD Gap Analysis Checklist.

- This list of elements is not an exhaustive list that could be asked. The elements presented here cover major areas of the requirements and have been found relevant starting places by which further discovery can be made.

- The elements provide basic components of organizational management which are required to show evidence of implementation of the requirements and the continual improvement efforts of the department.

**“Follow the Yellow Brick Road”**

- Before you begin asking questions from the audit checklist you need to be aware of the pattern as to which the elements are asked.

- Not all elements are asked of everyone.

- The organizational model shows the pattern that should be followed (**Figure B**). By examining and using the organizational chart as a roadmap, you can ensure a broad spectrum of the department is examined.

- You are not only asking questions to receive a “yes” or “no” answer; you are seeking evidence that those answers are validated with some form of proof.

- You are also checking to see if the eight quality principles are being applied in addition to the PDCA model.

---

**Notes:**

---
Figure B
21 Elements

1. Organizational Chart

Notes:

2. Mission Statement

Notes:

3. Measurable Objectives

Notes:

4. Employee Feedback

Notes:

5. Meeting Minutes

Notes:
6. Non-Conformance

Notes:

7. New Employee Department Orientation

Notes:

8. Department Procedures

Notes:

9. Competency, Training and Awareness

Notes:

10. Disaster Response Plan

Notes:

11. Use of Machines, Tools or Computers

Notes:
18. Employee Retention Report

Notes:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________


Notes:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

20. Supplier Review

Notes:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

21. Product and Service Planning and Realization

Notes:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Interviewing Staff Members

Section 3 of the process audit checklist contains questions to help guide the auditor in verifying evidence that implementation and communication of the process management system is being conducted.

Verifying and testing staff members’ knowledge of written procedures

Verifying and testing staff members’ knowledge of the Management Process System

Notes:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Recording Opportunities for Improvement (OFI)

**OFI** - Discovered during an audit, an opportunity for improvement refers to a potential non-conformance, problem or improvement that could better enhance the product/service of the department or division.

If OFIs are found, they must be listed in step 24 in the Process Audit Checklist (AUD-F002)

**Recording Non-conformances**

Corrective Actions are steps that are taken to remove the causes of an existing non-conformity or to make quality improvements. Corrective actions address actual problems. In general, the corrective process can be thought of as a problem solving process.

If non-conformances are found, they must be listed in step 24 in the Process Audit Checklist (AUD-F002)

**Reporting PCA/OFI Information**

**PCA = Corrective Action, Preventive Action, Opportunity for Improvement**

- Writing a PCA is required if a nonconformity/OFI is found.
  - You should have noted the nonconformity/OFI on your checklist when found and discuss it with the auditee during the audit and at the closing.

- Guidelines for writing PCA’s/OFI’s:
  - Use familiar terminology
  - Provide enough information so others can locate and recognize the problem
  - Make them helpful
  - Be concise
• Elements of a PCA/OFI:
  o Source of the requirement
  o The requirement itself
  o Source of the evidence
  o The evidence itself

Notes:


Completing the Process Audit – Checklist (AUD-F002)

Upon completing the Process Audit Checklist, ensure that all areas of the checklist have been addressed. Do not leave any portion unanswered.

Reporting Audit Results/Process Audit Summary Report (AUD-F004)

• The audit report is the formal record of the audit

• Useful reference for all users

• Should provide enough detail so that the findings can be validated against observed facts

• Balanced
  o Positive Comments with nonconformities and opportunities for Improvement

Notes:
Closing Meeting

- Conduct a closing meeting
- Review findings throughout the audit and again at the closing
- Helps generate rapport
- Demonstrate professional courtesy
- Can provide opportunity for additional information and clarification
- No surprises
- Closing meeting should take place when you have finished the audit and before you leave the department
- Thank those who participated
- Discuss positive aspects of department or audit
- Discuss nonconformities and opportunities for improvement
- If possible, leave a copy of the summary report with the department head or fax it as soon as possible

Notes:
Concluding the Audit

- Complete the summary report at the end of the audit (If possible)
- Make sure auditee gets a copy of summary report
- Close out the audit by turning in to the MPS office
  - Checklist
  - Summary report
  - Printouts of PCAs, if applicable
- If needed, do any additional work based upon the Lead Auditor's review of the audit

Closing Remarks

Notes:

Below are numbers and information that will assist you with any questions or comments.

Management Representative: Maureen Fox 799-5343

Lead Auditor: Janette Scott 799-6360, ext. 5070

MPS office: 799-5865

Further information can be found at www.CCSD.net/mps
The Clark County School District Management Process System