

## **SYSTEM PROCEDURE EMS INTERNAL AUDIT**

### **1.0 PURPOSE**

This procedure defines the process for conducting periodic audits of the Solid Waste Management Division Environmental Management System. The purpose of the audit includes but is not limited to determining continued conformance with ISO 14001 and other requirements and that the EMS is properly maintained and documented.

### **2.0 SCOPE**

This procedure applies to the Solid Waste Management Division and its operations.

### **3.0 DEFINITIONS**

- 3.1 EMS Audit:** a periodic process to assess the EMS against the ISO 14001 requirements and against the divisions EMS documentation and records.
- 3.2 Lead Auditor:** an auditor who is authorized to plan, organize, and direct EMS audits in the Division. The Lead Auditor will report findings and observations, and evaluate the adequacy of corrective and preventive action. The lead auditor should be appropriately trained for this purpose.
- 3.3 Audit Finding:** results of the evaluation of the audit evidence compared with the ISO 14001 criteria. This could be a nonconformance or an observation.
- 3.4 Nonconformance:** a deficiency or failure to meet the standards of ISO 14001. May be a minor missing system component, an isolated incident or any number of incidents that lead to the failure to conform completely with ISO 14001 as it relates to this facility.
- 3.5 Observation:** a practice or the absence of a practice, while not in violation of ISO 14001, could strengthen the system or cause a system failure.
- 3.6 Corrective Action Request (CAR):** as a result of the audit findings, CARs are assigned to all nonconformances to correct all environmental problems as they occur. This measure may also be used to correct safety and other issues on this facility.
- 3.7 Preventive Action Request (PAR):** as a result of audit findings, PARs are assigned to any observation made that may prevent potential environmental problems before they occur.

### **4.0 RESPONSIBILITY**

It is the responsibility of the Environmental Program Manager to routinely schedule audits and recruit or assign an internal audit team according to this procedure.

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## **4.1 Specific Responsibilities**

### **4.1.1 Environmental Program Manager**

The Environmental Program Manager (EPM) is responsible for developing the yearly audit schedule in June for the coming fiscal year, initiating internal audits and recruiting or assigning an audit team.

The EPM will maintain EMS audit records, including a list of auditors, audit schedules and procedures and all audit reports. The EPM will select the Lead Auditor who will be exempt from the day-to-day operations of the division during the audit cycle.

### **4.1.2 Lead Auditor**

The Lead Auditor (LA) is responsible for notifying, organizing, planning, training and directing the Audit Team prior to and during the EMS audit.

The LA shall schedule and facilitate all Audit Team meetings, which consist of the opening, closing and any briefing meetings required.

The LA initiates the corrective action or preventive action process and prepares the notices. The LA will prepare the audit team to conduct any follow up audits needed and will prepare the final audit report, summary of findings and forward it to the EPM.

### **4.1.3 Auditors**

Auditors are responsible for collecting, analyzing and documenting objective evidence through interviews, document examination and visual observation during the audit investigation. They shall record their observations and findings and assist the Lead Auditor in the preparation of CARs or PARs.

### **4.1.4 Division Manager**

The Division Manager shall provide appropriate resources to support the EMS and its audits. The Division Manager shall report progress or findings to upper management and other interested parties.

### **4.1.5 Senior Refuse Supervisors**

The Senior Refuse Supervisors shall provide appropriate resources to conduct the audit such as staff time, workspace and records as needed. The Senior Refuse Supervisors are responsible for ensuring the prompt and effective resolution of any corrective or preventive action audit findings and for ensuring there is no reoccurrence.

### **4.1.6 Refuse Supervisors**

Refuse Supervisors shall facilitate the audit in any way necessary and assign an audit guide if needed. Refuse Supervisors are responsible for implementing the corrective or

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preventative action identified in the audit and for thoroughly training employees under their supervision.

#### **4.1.7 Employees**

It is the responsibility of all employees to perform their job in accordance with the appropriate operating instructions and for notifying their supervisor whenever they discover problems that may adversely affect the EMS or our legal and safety requirements.

### **5.0 PROCEDURE**

Based upon the fiscal year audit schedule, the audit process shall proceed as follows:

#### **5.1 Audit Plan**

- 5.1.1** The Environmental Program Manager shall notify the Division Manager, the Lead Auditor and the Audit Team of the proposed audit. The Audit Team should represent a broad section of the division activities so that individuals can be assigned to areas they do not manage or work in.
- 5.1.2** The Lead Auditor reviews previous audit report findings and the status of CARs or PARs prior to preparing the audit plan. Areas identified by previous audits for corrective or preventive action should be included in the scope of the audit.
- 5.1.3** Lead Auditor completes the audit plan. The audit plan includes the date, audit number, Scope and Objective, specify sections of ISO 14001 being audited and areas of the facility being audited, an audit schedule with auditor assignments, questionnaires and Nonconformance Report. Auditors may modify the scope and plan if necessary. These changes must be documented.

#### **5.2 Conducting the Audit**

- 5.2.1** The Lead Auditor shall convene the opening meeting to brief the Audit Team on the general scope of the audit, the details of the audit plan, receive input on the audit plan and schedule and discuss assignments.
- 5.2.2** Review key EMS documentation before touring the site and conducting interviews. Records that shall be reviewed include but are not limited to:
  - ❖ Environmental Policy
  - ❖ System Procedures
  - ❖ EMPs
  - ❖ EMS audit reports
  - ❖ Results of Management Reviews
  - ❖ Status of compliance with voluntary requirements

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- ❖ Other relevant documents requested by Lead Auditor, Environmental Program Manager, Division Manager or other upper management.

- 5.2.3** Tour the site.
- 5.2.4** Interview staff and observe activities and conditions. Responses and evidence shall be documented.
- 5.2.5** Look for evidence to verify information from interviews through observations, records or independent sources paying particular attention to items previously identified for corrective or preventative action or findings from other audits.
- 5.2.6** The Audit Team shall then meet and report on audit progress as directed by the audit plan and schedule.
- 5.2.7** Findings and observations will be documented by the Lead Auditor; including any corrective action taken during the audit. An internal audit report is drafted in preparation for the closing meeting.
- 5.2.8** The Lead Auditor conducts the closing meeting to present audit findings, clarify any conflicting or confusing information, identify positive practices, review objective evidence that supports the findings, and summarize the audit results.

### **5.3 Reporting Audit Results**

- 5.3.1** After the closing meeting, the Lead Auditor prepares the final audit report. The final audit report includes a summary of the audit scope, identifies the audit team, describes the source of evidence used, summarizes the findings and results. Copies of the final report will be submitted to the Environmental Program Manager, the Division Manager and the EMS file.
- 5.3.2** For findings that require long-term corrective action, the Lead Auditor will prepare a CAR notice and place a copy in the EMS record system. The original will be assigned to the appropriate staff person by the Division Manager, Senior Refuse Supervisor or Refuse Supervisor as appropriate for implementation.
- 5.3.3** The Division Manager ensures the availability of the audit report(s) for Management Review.

### **5.4 Audit Followup**

- 5.4.1** The Division Manager and Senior Refuse Supervisors are responsible for any follow-up actions needed as a result of the audit.
- 5.4.2** The EPM is responsible for tracking the progress and effectiveness of corrective actions.

## 5.5 Record Keeping

- 5.5.1 A copy of this procedure shall be maintained with the records of the division and with each relevant staff person.
- 5.5.2 Records shall be maintained according to the City of Berkeley Records Retention Schedule.
- 5.5.3 The official document will have original signatures and be located in the EMS Manual in the office of the Division Manager.
- 5.5.4 Changes and updates to this procedure will be made in accordance with our Document Control System Procedure and Record Management System Procedure.

## 6.0 AUDIT AND REVIEW

The Environmental Program Manager and the Division Manager shall review conformance with this procedure at such intervals as they deem appropriate, but no less than biennially. At least biennially the Division Manager shall review this procedure to ensure it is still relevant and meets the needs of the division.

## 7.0 PERSONNEL ACTION

All employees are required to comply with all established policies and procedures of this division, the Department of Public Works, the City of Berkeley and all local, state and federal regulations pertaining to this facility. Disciplinary action will be recommended up to and including termination in accordance with established City of Berkeley procedures and SEIU Local 790, Local 535 and Local 1 labor union contracts.

## 8.0 REFERENCE

Public Works Environmental Policy  
EMS Manual  
ISO 14001 Documentation

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EMS Program Manager - Preparer

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Date

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Environmental Program Manager

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Date

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Sr. Refuse Supervisor - Reviewer

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Date

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Sr. Refuse Supervisor - Reviewer

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Date

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Division Manager - Approval

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Date

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