AS/NZS ISO 9001:2008
Compliance Report

RRW & Co P/L

REVIEW DETAILS			
Invoice Reference Number	**Certificate Number**	**Review Date/s**	**Review Time Hours**
S6647	158	4th June 2012	6

Audit times as per Guidelines and Critical Process reviewed	**If times not to Guidelines or Critical Process NOT Reviewed (Specify)**
Yes	

Type Of Audit →	Surveillance
Audit Location	
167 Logan Rd, Woolloongabba	

Audit Team Leader	**Audit Team Member**
Brian de Cambra	
Audit Team Member	**Audit Team Member**

Client Contact	**Auditor Conflict**
Anthony Barber	No

Procedures or Work Processes to be Reviewed
ISO 9001: 2008 Quality Manual, Procedures and associated Documentation.

Capability Statement (Including ANZSIC Codes) as to appear on the Certificate
Scope: Management Consultancy, Workplace Training, Further Education

ANZSIC Codes: 7855, 8432, 8440

Entry / Exit Meeting Attendees			
Name	**Position**	**Name**	**Position**
Brian de Cambra	SciQual Auditor	Anthony Barber	QA & finance Manager

Sites / Areas Reviewed
167 Logan Rd, Woolloongabba

Review Report Details

Confidentiality:

Information obtained from RRW & Co and reviewed in the course of producing this Report will be treated as confidential. It will not be used for any purpose other than for the production of this Report.

Disclaimer:

This report has been prepared by Sci Qual International Pty Ltd for the purpose of determining the Standard implementation of RRW & Co's management systems to AS/NZS ISO 9001:2008 at nominated sites.

Due to the sampling nature of auditing, some deficiencies may exist that were not detected at the time of the Audit.

The contents of this Report are intended only for use in determining whether RRW & Co meets the AS/NZS ISO 9001:2008 Standard.

Whilst every effort has been made to ensure the accuracy of this Report, Sci Qual International Pty Ltd will not be held responsible, and extends no warranties as to the suitability of such information or for the consequences of its use. Likewise, neither Sci Qual International Pty Ltd nor the Auditor will be held responsible for actions taken by third parties as a result of information contained in this Report

Audit Procedure:

Following an Entry Meeting, a Desktop Review was conducted on the Quality Manual and Procedures.

This Audit was conducted in accordance with the current auditing Standard ISO 19011:2002. The focus of this assessment was an extensive review against AS/NZS ISO 9001:2008. The findings are recorded on an exception basis. Due to the sampling nature of auditing other non-conformances may be present that were not detected at Audit.

When auditing electronic based systems the Auditors may assess a number of the elements via the internet under passwords provided by RRW & Co for this purpose and under the strict security protocols. Where passwords are obtained and used they are to be removed by the client following the Audit and a new password obtained for each Audit. Under no circumstances are files to be down-loaded unless the Auditee approves the down-load. The security of the information and the validity and the methods of establishing the electronic record will be assessed to ensure it has been either scanned from an original document or established under password protection. Electronic based systems must be backed up both in an effective manner with some method of ensuring that data is not lost. Offsite back ups are usually required.

Record of Audit:

This Report contains a summary of all Audit findings. Details of documentation reviewed, persons interviewed and other observations, which may have been noted on the day of the Audit, will be contained within the Auditor's notes. These notes if retained will be on file at Sci Qual International Pty Ltd Head Office.

Use of Logos:

A review of the use of both the JAS-ANZ Accreditation Symbol and the Sci Qual International Pty Ltd Logo confirmed, from the documentation sighted during this Audit, their correct and proper use in both Marketing and Administrative Purposes

This review also confirmed that neither the JAS-ANZ Accreditation Symbol nor the Sci Qual International Pty Ltd Logo had been used on any product or product packaging seen by the consumer or in any other way that may be interpreted as denoting product conformity. This includes the results of laboratory tests and calibration or inspection reports, as such reports are deemed to be products in this context

. . . Summary of Findings . . .

Changes since the last audit

There have been no significant changes in the organisation since the last audit and the management system has retained the same structure.

Employee numbers are approx: 5 FTE

Review of previous Non-Conformances and/or Improvements raised

Previous improvements have been reviewed the items have either been modified or clarified. Those improvements are now closed.

Non-Conformances raised at this Audit

There were no Non-Conformances raised as the result of this Audit.

Improvement identified at this Audit

One Improvement Opportunity was raised as the result of this Audit.

Improvement Opportunity # 1 – Clause 4.2.3 Control of Documents

The organisation may like to review the Flowchart 03.B Complaints as it appears to have been corrupted – the section under Serious System Error is not accurate.

Recommendation

It is recommended that the organisation be granted continued certification to ISO9001:2008

The auditor would like to thank the management and staff for their assistance and cooperation during this process.

. . . Report Findings . . .

Note: Elements shaded greys are mandatory for every audit. Certification & Re-certification audits must cover all elements of the standard

4 – Quality Management System

4.1 General Requirements

Satisfactory

The organisation has developed a management system that addresses the requirements of ISO9001:2008. The system is held electronically and all employees have access via the organisation intranet.

4.2 Documentation

Improvement Opportunity

The system documentation includes a controlled Manual, Procedures incl Flowcharts, Forms and when required work instructions. There is a document & data control procedure and the backup process is included. A Quality Manual is maintained and this is dated 11th April 2012.

Improvement Opportunity

The organisation may like to review the Flowchart 03.B Complaints as it appears to have been corrupted – the section under Serious System Error is not accurate.

5 – Management Responsibility

5.1 Management Commitment

Satisfactory

Management Commitment has been demonstrated via the allocation of resources to maintain the system, audit activity and the ongoing review of the system.

5.2 Customer Focus

Satisfactory

Through the delivery of training, the organisation is able to maintain very close contact with customers. This provides the opportunity for performance feedback, and the customer's requirements are documented in "contracts" established for each project which provide trainers with relevant details.

5.3 Quality Policy

Satisfactory

A Quality Policy has been maintained and it appears to be relevant to the business. References have been made to Standards, Employees and Customers.

5.4 Planning

Satisfactory

The organisation utilises (from RTO requirements) the following categories for setting and reporting objectives, Learner Engagement, Employer Satisfaction and Competency Completion. The results of these are reported annually and referenced in the management review database.

5.5 Responsibility, Authority and Communication
Satisfactory
The Quality Manual makes reference to responsibilities and the Position Descriptions contain specific detail. The file of Position Descriptions included Admin Staff, Director, QA & Fin Manager, Trainer and Training Manager. These were sampled and found to be compliant, they contained responsibilities and accountabilities.

5.6 Management Review
Satisfactory
Management Review occurs as an ongoing process, i.e. the organisation utilises a database to log Customer Complaints and all relevant business issues and the database contains the organisation response and any investigation details that may be relevant. A review of the database records indicate that management review has been completed.

6 – Resource Management
6.1 Provision of Resources
Satisfactory
The organisation has provided resources to manage, audit and update the Quality Management System. A QA Manager has been appointed and the system contains records of audit, review, and update.

6.2 Human Resources
Satisfactory
The organisation conducts performance appraisals of employees and a sample of these was reviewed. The appraisals contained references to training and professional development.

6.3 Infrastructure
Satisfactory
The organisation has developed an infrastructure including hardware and software that support conformity of product requirements i.e. the delivery of training. Training facilities are maintained on site and the organisation also conducts training off site.

6.4 Work Environment
Satisfactory
The work environment has been maintained to support conformance to product requirements. This includes the buildings and support services including location. The trainer's copy of the contract includes checklist for the setup and set down at offsite venues.

Important Note - relating to Section 7

1. Elements reviewed where Scope Reduction Permitted is ONLY within Section 7.1 – 7.6
2. Indicate where Scope Reduction has been applied if any.
3. Note these are mandatory for Certification and Re-Certification Audits.
4. Minimum of two selected Elements for Surveillance Audits ONLY unless it is critical to the Surveillance Programme.

Product Realisation

7.1 Planning of Product Realisation

Satisfactory

The organisation utilises a number of Flowcharts to manage the process of product preparation and delivery. These result in a "contact" that provides all the relevant deliverables and processes that trainers use to comply with the management system and RTO requirements. Examples of these contracts were reviewed as part of this audit and found to be compliant.

7.2 Customer-Related Processes

Satisfactory

The organisation has implemented effective arrangements for communicating with customers in relation to:-

- Determination of Requirements Related to the Product,
- Review of Requirements Related to the Product
- Customer Communication

7.3 Design and Development

NV – Not Verified

7.4 Purchasing

NV – Not Verified

7.5 Production and Service Provision

NV – Not Verified

7.6 Control of Monitoring and Measuring Equipment

NA – Exclusion

8.0 Measurement, Analysis and Improvement

8.1 General

Satisfactory – see sub clauses

8.2.1 Customer Satisfaction

Satisfactory

The organisation monitors customer satisfaction formally and informally. The formal assessment includes the use of feedback checklists as required by RTO's (from Qld Dept of Educ & Training) and additional Learning Program Evaluation checklists used by RRW. Informal feedback is received by the director and or the trainers. The feedback is captured in the Management Review Database and records were available to demonstrate compliance. The director reviews and signs off all feedback forms.

8.2.2 Internal Audit

Satisfactory

A documented procedure for Internal Audit has been maintained, PO17 and a flowchart 03.a is also maintained. Audits have been planned on the basis of risk to the organisation and audit results have been documented. Samples of the conducted audits were reviewed and found to be compliant. These included Downer Blasting Services RCC 11067i and 11068h high risk activities. Records of competence were reviewed as well as Downer Assessor competence for the modules delivered. These records were located and they appeared to be compliant. Additionally the organisation performs a RTO self-audit using an audit tool supplied by Qld Dept of Education & Training.

8.2.3 Monitoring and Measurement of Processes

Satisfactory

The organisation has applied suitable methods for monitoring and, where applicable, measurement of the quality management system processes.

These methods demonstrate the ability of the processes to achieve planned results. When planned results are not achieved, correction and corrective action was taken, as appropriate, to ensure conformity of the product.

8.2.4 Monitoring and Measurement of Product

Satisfactory

The organisation monitors and measures the characteristics of their product to verify that product requirements have been met. This is carried out at appropriate stages of the product realization process in accordance with the planned arrangements.

Evidence of conformity with the acceptance criteria is included in records that indicate the person(s) authorising release of product.

Product release and service delivery proceeds only after the planned arrangements have been satisfactorily completed with exceptions approved, where applicable, by the customer.

8.3 Control of Non-Conforming Product

8.5.2 Corrective Action

8.5.3 Preventive Action

Records of Non-Conformance, Corrective & Preventive Action are held in the management review database and this provides management with the ability to review the database and take appropriate action.

8.4 Analysis of Data
Satisfactory
Collection and analysis of data to demonstrate the suitability and effectiveness of the quality management system and to evaluate where continual improvement of the effectiveness of the quality management system can be made is performed by the organisation. The analysis of this data provides information relating to:- • Customer satisfaction, • Conformity to product requirements, • Characteristics and trends of processes and products including opportunities for preventive action, and • Suppliers.

8.5.1 Continual Improvement
Satisfactory
The organisation makes use of information derived from internal Audit and direct feedback from customers at the completion of training delivery. This information is used together with any reported non-conformance and/or complaints to make improvements to the system. The organisation also utilises an audit tool from Qld Dept of Education & Training to complete a self audit of the RTO requirements, this information is also used as a basis for improvement.

. . . Additional Details . . .

Scope Reduction Approved: Yes
If Yes Please Specify below

Permissible Exclusions applicable to the Organisation are: - 7.6 Monitoring & Measuring Equipment

Details of Next Audit Booked – Sites	Planned Date
167 Logan Rd, Woolloongabba	May 2013

. . . Review Report Agreement . . .

Certification recommended by the Auditor and approved by Certification Manager/delegate.

Audit Team Representative Name	Signature	Date
Brian de Cambra		5th June 2012

AUDIT RESULT CLASSIFICATIONS

The following classifications have been used when auditing this standard –

Satisfactory	S	**Improvement Opportunity**	IO
Not Applicable	NA	**Not Verified**	NV

Major Non-Conformance

- The absence of or the failure to implement and maintain one or more required management system elements, or a situation which would, on the basis of available objective evidence, raise significant doubt as to the quality of what the supplier is supplying.
- A maximum of one month to respond on actions to be taken.
- A maximum of three months to close out the major non-conformances.
- Where major non-conformances are raised, failure to comply with the requirements for close out mentioned above will result in suspension / cancellation of Certification unless, due to special circumstances, dispensation is granted by the Sci Qual International Pty Ltd Board of Directors.

Minor Non-Conformance

- This applies where a minor breakdown is observed against a particular requirement clause.
- It may indicate a sporadic breakdown in the implementation of a Procedure(s) or the partial breakdown of the Procedures.
- To be closed out by the next audit.

AUDIT PLAN for 2013

AS/NZS ISO 9001:2008

Client:	RRW & Co
Auditee's Representative:	Anthony Barber
Start Date:	**May 2013 (date to be confirmed)**
Audit Standard:	**ISO9001:2008**
Audit Scope:	Re Certification – Management Consultancy, Workplace Training, Further Education
ANZSIC Codes:	7855, 8432, 8440
Auditor/s:	Brian de Cambra who will be responsible for the entire Audit Process

Requirements for the Audit:

The Auditor requests a quiet area be set aside for reviewing Documents, and consolidating Audit Findings for the duration of the Audit.

Provision of Guides:

Even though the Auditor has assessed your Operations many times in the past, it is understood that a Guide is necessary due to your Safety Policy and the need to question Staff about their activities.

Please advise our office if:

- There are any special safety requirements that the Auditor needs to take to conduct the Audit;
- Whether there is any current conflict of interest between the Auditor and your Company which may prevent the Audit being conducted;
- Please advise if any areas are not available to be audited and whether any information is subject to special confidentiality provisions. All Auditor Profiles and a copy of their signed Confidentiality Agreements with Sci-Qual International Pty Ltd are available upon request.

A	B	C	ISO 9001:2008 - Requirement
Date i.e Day 1, Day 2 etc	**Site / Department i.e. Main office, Workshop etc or remote site**	**Auditor/s**	**Element**
Day 1 @ 9:00	Office area	Brian de C	***Entry Meeting with management team*** SQI regulations, Use of Certification Mark, Review against the standard, Factory tour, Changes since previous audit
am	Office area	Brian de C	4.1 Quality Management System ***4.2 Documentation***
			5.1 Management Commitment ***5.2 Customer Focus***
am	Office area	Brian de C	5.3 Quality Policy ***5.4 Planning-Quality Objectives and QMS planning*** 5.5 Responsibilities / Authorities defined and communicated ***5.6 Management Review***
am	Office area	Brian de C	***6.1 Provisions of Resources*** ***6.2 Human Resources*** ***6.3 Infrastructure*** ***6.4 Work Environment***

For surveillance audits at least two must be done. Ensure all critical elements are addressed.			
pm	Office area	Brian de C	7.1 Planning of product realisation 7.2 Customer related process 7.3 Design and development 7.4 Purchasing 7.5 Production and service provision ~~7.6 Control of monitoring and measuring devices~~
			Quality operations review
pm	Office area	Brian de C	***8.1 Measurement, Analysis and Improvement*** ***8.2.1 Customer Satisfaction***
pm	Office area	Brian de C	***8.2.2 Internal Audit***
Day 2	Office area	Brian de C	***8.2.3 Monitoring and Measurement of Processes*** ***8.2.4 Monitoring and Measurement of Product***
am	Office area	Brian de C	***8.3 Control of Non-conforming Product***
am	Office area	Brian de C	***8.4 Analysis of Data*** ***8.5.1 Continual Improvement***
pm	Office area	Brian de C	***8.5.2 Corrective Action*** ***8.5.3 Preventive Action***
pm	Office area	Brian de C	***Exit Meeting with senior management to discuss the outcome of the audit.***