



**CONFIDENTIAL**

**MANAGEMENT SYSTEM (MS) AUDIT REPORT  
For  
Memorial University Technical Services**

DATE OF AUDIT: February 5 & 6, 2019

DATE OF REPORT: February 10, 2019

AUDIT CRITERIA: **ISO 9001:2015**  
 APPLICABLE DOCUMENTS:  
 Technical Services, Memorial University MS Documents (Manual, Procedure, Work Instruction, Forms)  
 QUASAR Audit Documents

AUDIT TYPE: Surveillance Audit Two (SA2)

SCOPE OF THE MANAGEMENT SYSTEM: The scope of this quality management system applies to the Department of Technical Services, and all of its associated facilities distributed throughout Memorial University. It also includes all activities performed by Technical Services to fulfill our mandate to provide technical support to the various departments within the university. As part of this it will include all equipment and personnel both directly and indirectly providing service to our clients. As part of Memorial University, we are required to operate within policy and procedures as set forth by the University Administrative Department. These policies and procedures are established by the Office of the President and the Board of Regents and apply to all Department and employees. Due to the nature of the services provided by Technical Services all sections of the Standard apply to our operations.

<b>SITES:</b> (* - visited at this audit):		
*	<u># of Employees</u>	<u>Address</u>
*	69	253 Prince Philip Drive St. John's, NL A1B 3X7

AUDIT TEAM: Lead Auditor: Ray Kavanagh  
 Auditor: N/A

MANAGEMENT REPRESENTATIVE: Rick Meaney, Director  
 Jim Titford, Finance & Administration / Quality Manager

LANGUAGE OF AUDIT: English

LANGUAGE OF DOCUMENTATION: English

3225E/2015-06



CONFIDENTIALITY:

QUASAR ensures that client information will be maintained in confidence.

SIGNATURE OF LEAD  
AUDITOR:

*Ray Kavanagh*

## **CONCLUSIONS**

No nonconformities were found during the audit. Re-registration to ISO 9001:2015 is recommended.

a)	Conformity to the AUDIT CRITERIA	Y
b)	The ability to meet applicable statutory, regulatory and contractual requirements.	Y
c)	Effectiveness of the MS to ensure that specified objectives are met.	Y

## **CONCLUSIONS**

No nonconformities were found during this re-registration (transition) audit of the management system (MS). Registration to ISO 9001:2015 is recommended.

With regards to the AUDIT OBJECTIVES, the MS has demonstrated:

a)	Conformity to the AUDIT CRITERIA	Y
b)	The ability to meet applicable statutory, regulatory and contractual requirements.	Y
c)	Effectiveness of the MS to ensure that specified objectives are met.	Y
d)	The certification scope is appropriate to the context of the organization.	Y
e)	The audit objectives were achieved.	Y

Audits are based on a sampling process. Evidence collected during the audit is a representative sample of the overall operations of an organization; the results and conclusions include an element of uncertainty.

## **AUDITOR COMMENTS**

The scope of registration of Technical Services, Memorial University applies all of its associated facilities distributed throughout Memorial University. It also includes all activities performed by Technical Services to fulfill the mandate to provide technical support to the various departments within the University This includes all equipment and personnel both directly and indirectly providing service to our clients. As part of Memorial University, Technical Services is required to operate within policy and procedures as set forth by the University Administrative Department. These policies and procedures are established by the Office of the President and the Board of Regents and apply to all Department and employees. Due to the nature of the services provided by Technical Services all sections of the Standard (ISO 9001:2015) apply to our operations.

The Director is the top manager of Technical Services. Other members of the management team include the Manager of Finance and Administration / Quality Manager, and the Manager of the Mechanical Department and the Manager of the Electronics Department. The management team is supported by supervisory and operational personnel. Customer focus and continual improvement are top priorities of all employees. The top managers and some other members of the operational teams have extensive knowledge and experience. Technical Services provides valuable support to faculty members engaged in research. The Company has 69 employees and has substantial state of the art technical equipment and the expertise to meet the unique 'one of' requirements of the research faculty and other departments of the University. Technical Services Company has efficient and effective leadership at the top and throughout the ranks.

This report is based on a surveillance audit (SA2) that was performed in February 2019. The SA2 included applicable processes in the management system covering Leadership, Planning for the Management System, Support, he Scope, Context of the Organization, Leadership, Planning for the Quality Management System, Support, and a selection of processes for Operation, Performance Evaluation and Improvement.

The management system is documented to meet the requirements of ISO 9001:2015 and efforts of being made to integrate the requirements of the Standard into the Technical Services Management as best practices. As you go forward with review and revision of your management system documentation please ensure that the documentation is written and formatted in a manner that is easily understood and followed by all employees of the Company.

The internal audit was performed by internal auditors in-house and was moderately effective to identify opportunities for improvement. No nonconformities were reported in the internal audit. Going forward you could use the process descriptions contained in your QMS documentation as resource information for your internal auditors. The internal audit is one of your best tools for identifying opportunities for improvement.

The Director and his top management team are the hands-on drivers of the management system. Knowledge of the management system and effective leadership by the Director is essential and it was noted during this audit the Director and his top management team are very enthusiastic and dedicated. Efforts to raise the level of organizational knowledge of the management system by all employees is very important. The practice of mentoring in both the Mechanical and Electronics Departments contributes significantly to retention of organizational knowledge. Continued efforts should be maintained to capture the unique knowledge and skills of experienced employees.

Day to day activities supporting the management system are delegated by Director to appropriate employees keeping in mind that leadership and accountability for the efficiency and effectiveness of the management system cannot be delegated. The International Organization for Standardization promotes the inclusion of the requirements of ISO 9001:2015 in the management system as 'best practices' in a unified management system that emphasizes meeting customer requirements by each employee doing assigned processes right the first time and every time.

Implementation of the opportunities for improvement included in this Report would contribute to strengthening your management system

I wish you success in all your efforts. Keep up the excellent work!

Tentative date for the next audit:	Next audit type:	Date of expiry on the current certificate:
February 2020	SA2	07/10/20
Re-Registration audits should be booked eight to six weeks prior to the date of expiration.		

**Planned requirements / processes to be audited according to ISO 9001:2015**

Requirements	4	5	6	7.1	7.2	7.3	7.4	7.5	8.1	8.2	8.3	8.4	8.5	8.6	8.7	9.1	9.2	9.3	10.1	10.2	10.3
ST 2 / Re-Reg.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
1 <sup>st</sup> Surveillance	X	X	X					X	X	X	X	X				X	X	X	X	X	
2 <sup>nd</sup> Surveillance		X	X	X	X	X	X						X	X	X		X	X		X	X

**NONCONFORMITIES**

# of Minor:	# of Major:	Target response date:	Follow-up audit required:
0	0	N/A	No

Notes:

- Please ensure that you include responses for Disposition/Correction(s), Cause(s) and Corrective Action(s).
- For initial registration, if QUASAR is unable to verify the implementation of corrections and corrective actions of any major nonconformity within six months after the last day of Stage 2, a new Stage 2 Audit is required.

**OPPORTUNITIES FOR IMPROVEMENT**

Clause #	
	OIs are opportunities for improvement to the management system and an opportunity for QUASAR to contribute to our productive partnership. OI's are generic in nature and are not intended to be specific / prescriptive advice.
6.3	Inclusion of 'resources' in quality management system Control Form
7.1.3	Infrastructure – additional space for execution of work particularly in the Mechanical Department
7.2	Feedback from Senior levels of MUN to Senior officials of College of the North Atlantic on the content and delivery of the Refrigeration Program to highlight failure of students to achieve success in qualifying for the Red Seal endorsement at Journeyman level and determine root cause and corrective action
7.4	Document and implement a Communication Strategy (see example if book "ISO 9001:2015 in Plain English" by Craig Cochran)
8.7	Use of a combined NCR/Corrective Action form
10.2	Implementation on a 'time frame' for closure of NCRs

**AUDIT SUMMARY – ACCREDITATION RELATED ELEMENTS**

ACCREDITATION RELATED ELEMENTS							
		NCR#	S	O	M	M	N
			I	I	A	A	
17021-1 (9.1.3.4, 9.6.2.2 b)	Review of Previous Audit OIs and NCRs		X				
17021-1 (9.4.8.2 q) & 9.6.2.2 h) 8.4)	Use of Marks and Certificates		X				

ISO 9001:2015 AUDIT SUMMARY			EVALUATION				
	ELEMENTS	NCR#	S	OI	MI	MA	NA
<b>1. SCOPE</b>							
1	Scope		X				
<b>4. CONTEXT OF THE ORGANIZATIONX</b>							
4.1	Understanding the organization and its context						X
4.2	Understanding the needs and expectations of interested parties						X
4.3	Determining the scope of the quality management system						X
4.4	Quality management system and its processes						X
<b>5. LEADERSHIP</b>							
5.1	Leadership and commitment; Customer focus		X				
5.2	Quality policy		X				
5.3	Organizational roles, responsibilities, and authorities		X				
<b>6. PLANNING FOR THE QUALITY MANAGEMENT SYSTEM</b>							
6.1	Actions to address risks and opportunities		X				
6.2	Quality objectives and planning to achieve them		X				
6.3	Planning of changes		X	X			
<b>7. SUPPORT</b>							
7.1.1	Resources - General		X				
7.1.2	People		X				
7.1.3	Infrastructure		X	X			
7.1.4	Environment for operation of processes		X				
7.1.5	Monitoring and measuring resources		X				
7.1.6	Organizational knowledge		X				
7.2	Competence		X	X			
7.3	Awareness		X				
7.4	Communication		X	X			
7.5	Documented information		X				
<b>X8. OPERATION</b>							
8.1	Operational planning and control						X
8.2	Requirements for products and services						X
8.3	Design and development of products and services						X
8.4	Control of externally provided products and services						X
8.5	Product and service provision						X
8.6	Release of products and services		X				
8.7	Control of nonconforming outputs		X	X			
<b>9. PERFORMANCE EVALUATION</b>							
9.1.1	Monitoring, measurement, analysis and evaluation - General						X
9.1.2	Customer satisfaction		X				
9.1.3	Analysis and evaluation		X				
9.2*	Internal audit		X				
9.3*	Management review		X				
<b>10. IMPROVEMENT</b>							
10.1	General						X
10.2*	Nonconformity and corrective action		X	X			
10.3	Continual improvement		X				
<b>Elements noted by asterisk are performed at all stage two, re-registration, and surveillance audits EVALUATION CODE:</b> <b>S=Satisfactory; OI=Opportunity for Improvement; MI=Minor Nonconformity; MA=Major Nonconformity; NA=Not Applicable</b>							