



# KALOS

## CERTIFICATIONS

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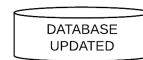
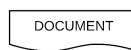
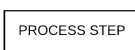
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Kalos Procedure-03  
**Planning & Conducting ISO 9001 Audits**

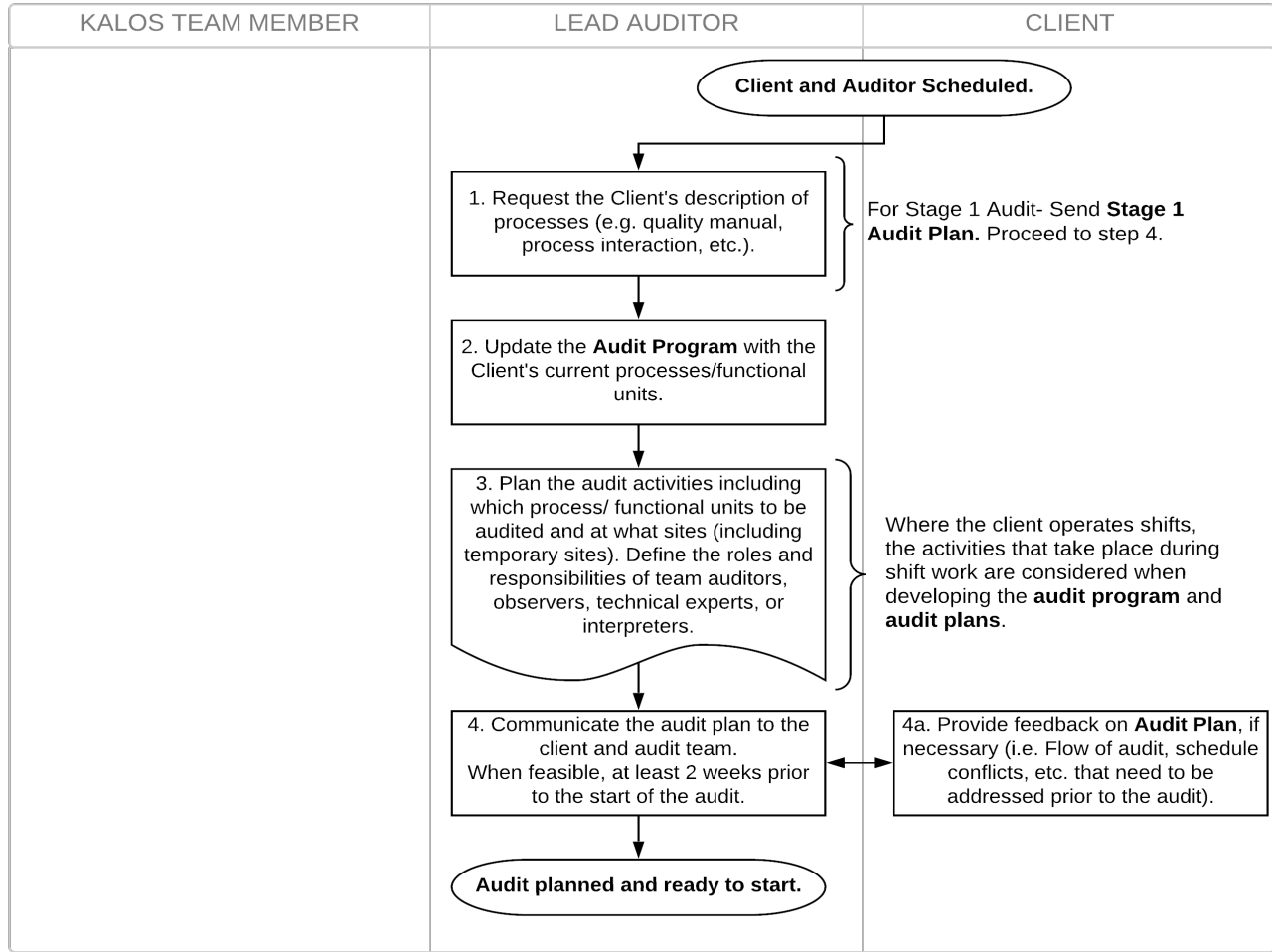
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**LEGEND:**



**1. Audit Program & Planning**

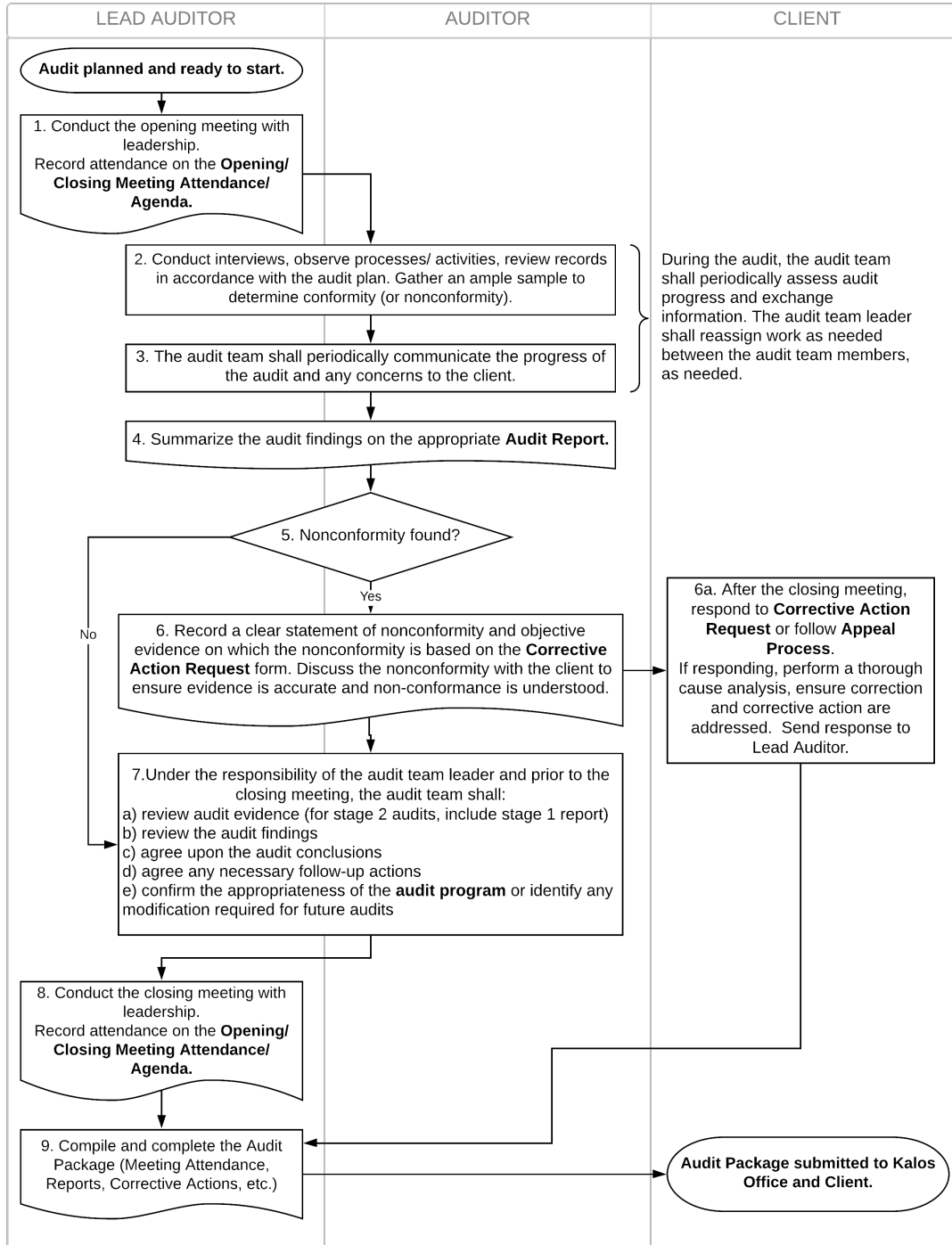


The following table explains the reports required for each type of audit conducted.

Legend	Required	If Applicable	Optional	Not Required	Stage 1	Stage 2	Surveillance	Recertification	Transfer	Corrective Action Revisit	Special
FM 02-04 A - Audit Calc and Risk Assessment (Printable)	X	X	X	X	X	X	X	X	X	X	X
FM 02-04 B - Notification of Audit (Printable)	X	X	X	X	X	X	X	X	X	X	X
FM 02-04 C - Recertification Review (Printable)				X				X			
FM-03-01 Opening- Closing Meeting Agenda and Attendance	X	X	X	X	X	X	X	X	X	X	X
FM-03-02 Stage 1 Audit Plan	X				X						
FM-03-03 Stage 1 Audit Report	X				X						
FM-03-04 Audit Program and Plan		X	X	X		X	X	X	X		X
FM-03-05 Audit Report (Due to client and Kalos 14 days after the closing meeting)		X	X	X		X	X	X			X
FM-03-06 Process Audit Questionnaire		X	X	X		X	X	X			X
FM-03-07 Corrective Action Request (majors and minors)						X	X	X			X
o <u>Surveillance Audit</u> – Acceptable plan submitted within 30 days, corrective action verified at next audit.						X	X	X			X
o <u>Recertification Audit</u> – Acceptable plan submitted within 30 days, corrective action implemented and verified within 60 days or prior to expiry date.						X	X	X			X
FM-03-08 Corrective Action Revisit Report										X	
FM-03-10 Pre-transfer Visit Plan									X		
FM-03-11 Pre-Transfer Review									X		



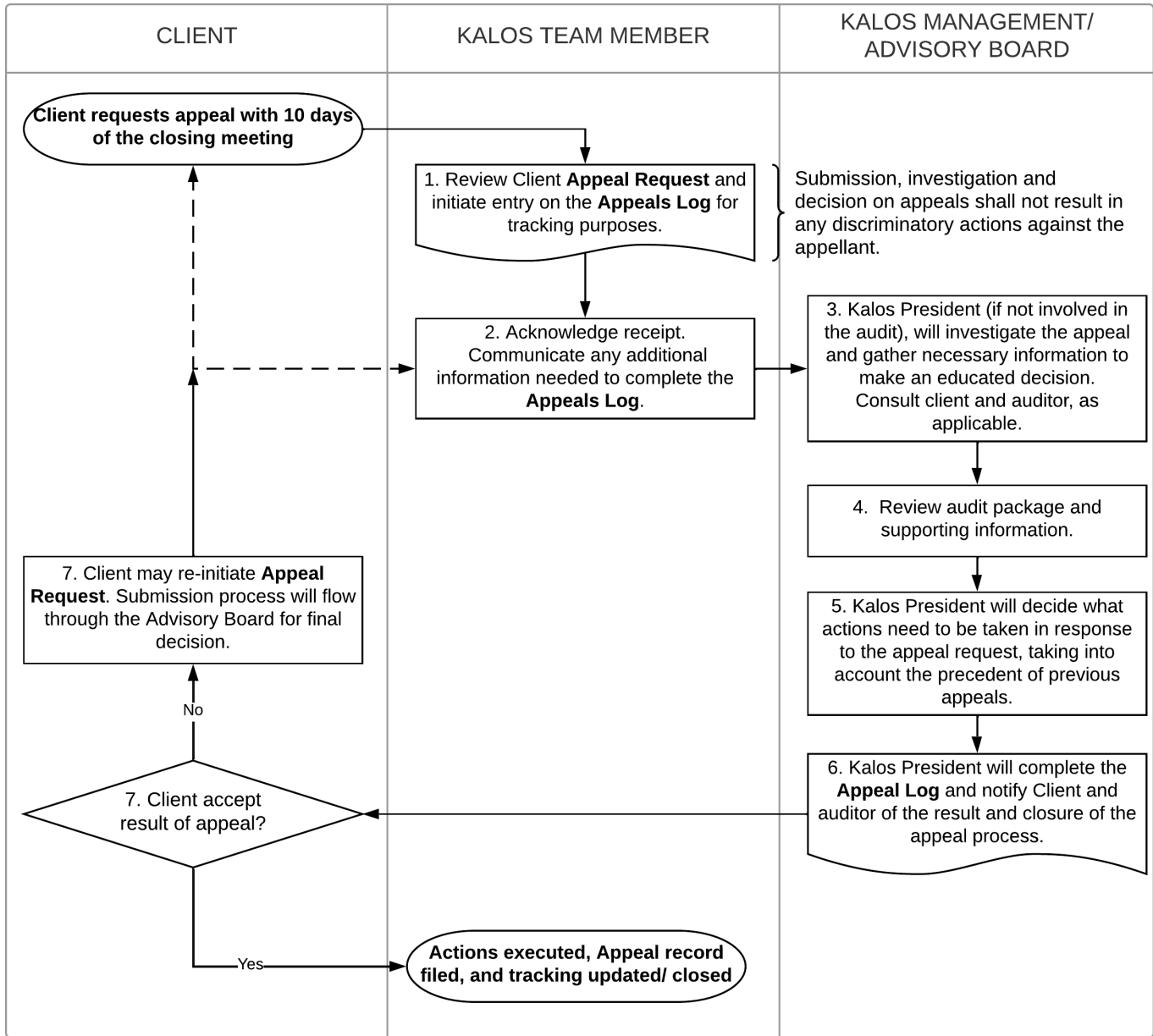
## 2. Conducting the Audit



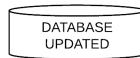
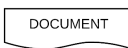
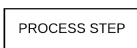
**2.1** In the event an audit is unable to be completed or audit objectives are not met, the lead auditor is to communicate this with the client and contact the Kalos office immediately. The office will determine the appropriate action to be taken on a case by case basis (e.g. rescheduling, adding time to subsequent surveillance, exchanging an auditor, etc.)



### 3. Appeals



LEGEND:



Revision History	Approved By	Date
DRAFT	Michaela Scarla	12/21/2018
RELEASE	Michaela Scarla	1/20/2019
<i>Revised per ANAB Document Review comments listed in FA-5000 and CL-5313.</i> Section 1 – <ul style="list-style-type: none"> <li>Process map updated to include “Where the client operates shifts, the activities that take place during shift work are considered when developing the audit program and audit plans.”</li> <li>Table updated to “FM-03-07 Corrective Action Request (<a href="#">majors and minors</a>)”</li> </ul> Section 2- <ul style="list-style-type: none"> <li>In the event an audit is unable to be completed or objectives are not met, the lead auditor is to <a href="#">communicate this with the client</a> and contact the office immediately</li> <li>Process Map Step 7 updated to “Under the responsibility of the audit team leader and prior to the closing meeting, the audit team shall:               <ol style="list-style-type: none"> <li><a href="#">review audit evidence (for stage 2 audits, include stage 1 report)</a></li> <li>review the audit findings</li> <li>agree upon the audit conclusions</li> <li>agree any necessary follow-up actions</li> <li>confirm the appropriateness of the audit program or identify any modification required for future audits”</li> </ol> </li> </ul>	Michaela Scarla	3/2/2019
Added Table of Contents 5/3/2019.	Michaela Scarla	No Change
<i>Revised per internal audit findings.</i> Minor grammatical corrections. Revised audit report table – adjusted colors and added “Special” audit column.	Michaela Scarla	7/20/2019
<i>Reviewed during 2021 IA.</i>	Michaela Scarla	No Change
<i>Update Section 1 Table of Form to include planning forms. No change to process.</i>	Michaela Scarla	12/23/2022
<i>Revised per internal audit OFI:</i> <ul style="list-style-type: none"> <li><i>Update Appeals Flow Chart per KA-2023-108</i></li> </ul>	Michaela Scarla	3/19/2023

