

# Certificate Renewal

Report for:

Darlington Borough Council  
Darlington Audit Services

<b>LRQA reference:</b>	LRQ 0939713/ 0023
<b>Assessment dates:</b>	19-20 September 2011
<b>Assessment location:</b>	Darlington
<b>Assessment criteria:</b>	ISO 9001:2008
<b>Assessment team:</b>	Margo Logie
<b>LRQA office:</b>	Coventry



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Attachments

<b>This report was presented to and accepted by:</b>	
Name:	Brian McGuire
Job title:	Audit Manager

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## 1. Executive report

<b>Assessment outcome:</b>
The focus of the visit was on compliance to defined requirements. The management system continues to be implemented within the Council's Audit Services resulting in evidence being available to confirm compliance to the ISO 9001:2008 Standard. Continued certification to that Standard is recommended. This recommendation is subject to Technical Review by LRQA Coventry.
<b>System effectiveness and continual improvement:</b>
The system is well managed as evidenced through the audit records seen, the checks in place that are consistently completed and the meetings minutes available. The client surveys and feedback received including the CIPFA benchmarking shows that the management system is effective in supporting the team in the delivery of their objectives.
<b>Areas for management attention:</b>
No issues were identified during the assessment.



## 2. Assessment summary

### Introduction:

This is a report relating to a certificate renew visit conducted over two days (to incorporate necessary travel). The intent of the visit was to sample elements of the Audit Service to assess the level of implementation and effectiveness of the management system. An opening meeting was attended by Brian McGuire – Audit Manager and Paul Robinson - Audit Finance Officer. At this meeting, the scope and criteria were confirmed. There was a discussion on the current situation with the Council and the Audit team, including the political/economic situation and its effects, risks and challenges and performance against objectives. The financial constraints under which the Council is operating has impacted the team and this is likely to continue to over the next few years. The remit of the audit work has already changed this year as priorities have changed within the three service areas (Place, Resources & People). Transformation projects are progressing within the Council which the team are involved in supporting through their consultancy remit. These have also had an impact on the audit plan as some of the service areas due to be audited will be changing their structure or processes radically. So far this year a substantial amount of time has been taken up with investigation work. A closing meeting was held to discuss the content of this report.

**Assessor:** Margo Logie

<b>Assessment of:</b>	Management System	<b>Auditee(s):</b>	Brian McGuire – Audit Manager Paul Robinson – Audit Finance Officer
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### Audit trails and sources of evidence:

Annual Governance Statement July 2011  
Audit Services Annual report July 2011  
Objectives 2010/11 and 2011/12  
Audit Benchmark Club Report 2011  
Management Review 15 May 2011  
Staff Meetings – Jul to Sep  
Audit Services Away day 31 Aug (agenda and actions)  
Document changes numbers 13 to 15  
Client Surveys

### Evaluation and conclusions:

The monitoring of performance against objectives continues to be robust. The objectives have not changed this year. The effectiveness of the Service is scrutinised as part of the annual review process including internal and external auditors' reviews.

All aspects of the management system are well controlled and it operates effectively.

The recent away day provided evidence of continual improvement being considered and followed through, with changes to MKInsight being reviewed and process changes considered and implemented.

The survey results continue to show that the Service is well received and highly thought of.

The logo was seen in use appropriately.



<b>Assessment of:</b>	Audit Services	<b>Auditee(s):</b>	Brian McGuire - Audit Manager Paul Robinson, Craig Alderson & Nicola Cooke – Audit Finance Officers
<b>Audit trails and sources of evidence:</b>			
Audit work – Dodmire School, Dolphin Centre & Housing rents files Xentrall Audit Report (Payroll) Investigations – all 2011 files Consultancy projects – Sales ledger, Income system & Housing repairs Annual Appraisals (B McGuire & N Cooke) One to one notes (P Robinson, C Alderson & N Cooke) Training course attendance record sheet			
<b>Evaluation and conclusions:</b>			
<p>The work continues to be well controlled with all records held on MKInsight. The structure of audits is well established with risks being reviewed each time but few changes needed. Likewise reporting and monitoring are firmly established processes that are effectively operated. The maintenance of working papers and the confirmation of the sign off of reports met a high standard. It was also evident that changes to requirements were being considered as part of the planning process, e.g. changes to school audit programmes as a result of the abolition of FMSiS.</p> <p>The consultancy projects have just commenced therefore only scoping documents had been produced so far. All the working papers for these and for the Investigation files were in good order. The Investigation records demonstrated that they had all been conducted per the procedure.</p> <p>The monitoring of work standards and personal objectives remains consciously and consistently undertaken, resulting in high standards being maintained.</p>			



### 3. Assessment findings log - ISO 9001:2008

Grade 1	Status 2	Finding 3	Corrective action review 4	Process / aspect 5	Date 6	Reference 7	Clause 8

1. Grading of the finding *	2. New, Open, Closed	3. Description of the LRQA finding	4. Review by LRQA	5. Process, aspect, department or theme
6. Date of the finding	7. YYMM<Initials>seq.#	8. Clause of the applicable standard		

\* Major NC = Major nonconformity      Minor NC = Minor nonconformity



#### 4. Assessment schedule

Visit type >	1 <sup>st</sup> Surveillance	2 <sup>nd</sup> Surveillance	3 <sup>rd</sup> Surveillance					Certificate renewal
Due date >	Jun 12	Mar 13	Dec 13					Sep 14
Start date >	14 May							
End date >	15 May							
Assessor days >	1 + Trv	1 + Trv	1 + Trv					1 + Trv
Process / aspect								
<i>Final selection will be determined after review of management elements and actual performance</i>								
Complaints	✓							
Continual Improvement	✓							
Corrective Action	✓							
Internal Audit	✓							
Management Review	✓							
Management System Changes	✓							
Use of Logo	✓							
Audit Planning and Service								
Special Investigations	✓							
Advice & Consultancy	✓							
Training & Competency								

#### Next visit details

<b>Visit type</b>	1st Surveillance				
<b>Assessor days</b>	1 + Trv	<b>Due date</b>	June 2012	<b>Actual start / end dates</b>	14-15 May 2012
<b>Locations</b>	Darlington				
<b>Activity codes</b>	7412				
<b>Team</b>	Margo Logie				
<b>Criteria</b>	ISO 9001:2008				
<b>Remarks and instructions</b>					
Note: Opening meetings will be at 09:30, and closing meetings at 16:00, unless agreed otherwise.					



## 5. Assessment plan

<b>Assessment type</b> Certificate Renewal	<b>Assessment criteria</b> ISO 9001:2008	
<b>Assessment team</b> Margo Logie	<b>Assessment dates</b> 19 & 20 Sep 2011	<b>Issue date</b> Jan 2011

(Day 1)

- 11:30      Introductory meeting with management to explain the scope of the visit, assessment methodology, method of reporting and to discuss the company's organisation (approximately 15 minutes). The Team Leader will agree a time to meet with senior management to discuss policy and objectives for the management system.
- Review of organisational and system changes
- Lunch
- Management System – Policy, objectives, risks, legislative requirements, annual review, quality audits, document control, records management, library, Competency, training and development
- Audit Planning
- Audit Service including Xentrall Shared Services
- Report writing
- 17:00      Close

(Day 2)

- 9:00      Review of findings from previous day. Review of the assessment plan for the day.
- Investigations
- Consultancy
- Preparation of final report.
- 14:00      Closing meeting with management to present a summary of findings and recommendations.



## 6. Certificate details



### DRAFT CERTIFICATE OF APPROVAL

*This is to certify that the Management System of:*

**Darlington Borough Council  
Darlington Audit Services  
Darlington  
UK**

*has been approved by Lloyd's Register Quality Assurance  
to the following Management System Standards:*

**ISO 9001:2008**

*The Management System is applicable to:*

**The provision of a statutory internal audit service to Darlington Borough Council, incorporating advice, consultancy and special investigation services.**

**Technical review date:**

Office use only

**Certificate  
expiry:**

Office use;  
Assessor enter if  
non-standard

Type of certificate:



Single certificate

*(Complete this form)*



Certificate per location

*(Complete this form for each location)*



Multi-site  
certificate

*(Complete additional multi-site form)*



Multiple languages

*(Complete required forms for each required language)*

Accreditation / number of certificates:



UKAS / 1



RvA /



/



Not accredited  
/

Reason for issue of certificate



Initial certification



Change of certification



Certificate renewal

Further instructions: (e.g. module and / or annex for directives):

QA Register entry (for UKAS accreditation only)

Required



Not required





## 7. Report explanation

<b>LRQA Findings Log definitions and information</b>
<b>Definitions of Grade Findings</b>
<p><b>Major Nonconformity</b> <i>The absence of, or the failure to implement and maintain, one or more management system elements, or a situation which would, on the basis of the available objective evidence, raise significant doubt of the management to achieve:</i></p> <ul style="list-style-type: none"><li>• <i>the policy, objectives or public commitments of the organisation</i></li><li>• <i>compliance with the applicable regulatory requirements</i></li><li>• <i>conformance to applicable customer requirements</i></li><li>• <i>conformance with the audit criteria deliverables.</i></li></ul>
<p><b>Minor Nonconformity</b> <i>A finding indicative of a weakness in the implemented and maintained system, which has not significantly impacted on the capability of the management system or put at risk the system deliverables, but needs to be addressed to assure the future capability of the system.</i></p>
<b>Additional information</b>
<p><b>Isolated issues and opportunities for improvement</b> - <i>Any isolated issues identified during the assessment, which have not resulted in a nonconformity being raised, we will record in the appropriate process table in the report.</i> <i>If we identify opportunities to improve your already compliant system, we will either record them in the process table applicable to the area being assessed, or in the Executive summary of the report if they can deliver improvement at a strategic level.</i></p> <p><b>Confidentiality</b> - <i>We will treat the contents of this report, together with any notes made during the visit, in the strictest confidence and will not disclose them to any third party without written client consent, except as required by the accreditation authorities.</i></p> <p><b>Sampling</b> - <i>The assessment process relies on taking a sample of the activities of the business. This is not statistically based but uses representative examples. Not all of the detailed nature of a business may be sampled so, if no issues are raised in a particular process, it does not necessarily mean that there are no issues, and if issues are raised, it does not necessarily mean that these are the only issues.</i></p> <p><b>Terms and conditions</b> - <i>If the company experiences any breach of regulatory or statutory requirement, it is required to inform LRQA, as detailed in the Terms and Conditions clause of the contract (1.7). Please note that, in the standard terms and conditions of contract (see below) clients have an obligation to advise LRQA of any breach of legal or regulatory requirements and any pending prosecution. Although proportionality and scale of the situation should be considered, you are required to advise LRQA of any serious potential risks to our certification but not, for example, isolated cases of a minor nature.</i> <i>“The Client is required to inform LRQA as soon as it becomes aware of any breach or pending prosecutions for the breach of any regulatory requirements relevant to the Certified Management System. LRQA will review the details of any breaches brought to its attention and may elect to perform additional verification activities chargeable to the client to ensure compliance with specified requirements. LRQA reserves the right to suspend or withdraw certificates of approval / verification statements and opinions for both failure to inform LRQA and the appropriate regulator of such breaches”.</i></p> <p><b>LRQA information</b> - <i>The client is also reminded of the information and guidance available to them from our website (<a href="http://www.lrqa.co.uk">www.lrqa.co.uk</a>). This includes information on our QMS, EMS, OHSAS, Verification and Validation products, our Training Services and our CE Directives products. Information is also available from <a href="http://www.lrqa.com">www.lrqa.com</a></i></p>