

Internal audit procedure

Manual | 12 steps | 3 roles | Created Sep 2, 2026 | Updated Sep 2, 2026 | v1

How internal audits are scheduled, conducted independently, evidenced, and closed out with findings.

TRIGGER

On the scheduled audit date from the annual audit programme, or when triggered by a recurring problem.

12 STEPS

1

Quality Manager prepares an annual audit programme covering every area, weighted by risk and by past findings.

Annually, before the year starts

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Risk-weighted, not evenly spread. Auditing the well-run area as often as the troubled one wastes the programme's capacity.

2

Quality Manager assigns a Lead Auditor who is independent of the area being audited.

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Independence is the point. Someone auditing their own area will not find what they have stopped noticing, however honest they are.

Independent auditor available: Go to step 3: Lead Auditor confirms the scope, the criteria being audited against, and the date with the Auditee in advance.

No independent auditor: Go to step 11: Quality Manager arranges an external or cross-site auditor for that area, or documents why independence cannot be achieved and what compensates for it.

3

Lead Auditor confirms the scope, the criteria being audited against, and the date with the Auditee in advance.

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Named criteria, not "a general audit". An audit with no stated criteria produces opinions rather than findings.

4

Lead Auditor reviews the documented procedure for the area before observing anything.

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Read first, so you are comparing practice against the document rather than against your own assumptions about how it should work.

5

Lead Auditor observes the process being performed and interviews the people who perform it.

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Observe the work, do not only read records. Records show what was written down; observation shows what happens.

6

Lead Auditor collects objective evidence for anything they intend to raise: a record, a photograph, a specific instance with a date.

Evidence, not impression. A finding without evidence will be argued away, and rightly so.

7

Lead Auditor classifies each finding as a major nonconformity, a minor nonconformity, or an opportunity for improvement.

Minor or improvement: Go to step 8: Lead Auditor presents findings to the Auditee at a closing meeting, confirming each is factually correct before it is recorded.

Major nonconformity: Go to step 10: Lead Auditor notifies the Quality Manager immediately of any major nonconformity rather than waiting for the report.

8

Lead Auditor presents findings to the Auditee at a closing meeting, confirming each is factually correct before it is recorded.

Confirm the facts, not the conclusion. A finding the auditee disputes on facts is usually the auditor having misunderstood the process.

9

Auditee agrees a corrective action and a date for each nonconformity, and owns it.

The auditee owns the action, not the auditor. An action owned by the person who found it never gets done.

Actions agreed: Go to step 12: Quality Manager verifies each corrective action was completed and was effective, and closes the finding only then.

10

Lead Auditor notifies the Quality Manager immediately of any major nonconformity rather than waiting for the report.

Major means something is materially wrong now. Holding it until a report is circulated next week wastes the time that matters.

Escalated: Go to step 8: Lead Auditor presents findings to the Auditee at a closing meeting, confirming each is factually correct before it is recorded.

11

Quality Manager arranges an external or cross-site auditor for that area, or documents why independence cannot be achieved and what compensates for it.

In a small organisation full independence is sometimes impossible. Say so in writing and state the compensating control; do not quietly ignore it.

Resolved: Go to step 3: Lead Auditor confirms the scope, the criteria being audited against, and the date with the Auditee in advance.

12

Quality Manager verifies each corrective action was completed and was effective, and closes the finding only then.

After the agreed action date

Closed on evidence of effectiveness, not on the action being marked done. A finding closed on a promise reappears at the next audit.

Effective, closed: Ends the procedure

Not effective: Go to step 9: Auditee agrees a corrective action and a date for each nonconformity, and owns it.

ROLES INVOLVED

Lead Auditor

Auditee

Quality Manager

REVIEW CADENCE

Annually, and before any external audit. Also review if internal audits have stopped producing findings, which usually means the process has become a formality rather than that everything is fine.

Name the person accountable for this procedure before you put it into use.

CHANGE THESE BEFORE YOU USE IT

- Define your major and minor nonconformity criteria concretely. Left to judgment, everything becomes minor.
- Set who can audit which areas, given your size, and record the compensating control where independence is genuinely impossible.
- Name the standard or criteria you audit against, and reference the specific clauses if you are certified.
- Set the verification interval in step 12 long enough that recurrence would actually have had a chance to happen.
- This is a starting point, not certification advice. Have it reviewed by whoever is accountable for your management system.

This is a free starting point from sendabrief.com, not compliance advice. It is written to be adapted.

Source: <https://sendabrief.com/templates/internal-audit-procedure>