



## **INTERNAL QUALITY AUDITS PROCEDURE FOR PROCESS STUDIES (CIS-P011)**

Clarksville-Montgomery County School System

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### **1.0 SCOPE:**

- 1.1 This procedure applies to all personnel requesting and administering Internal Consultation Audits in the Clarksville-Montgomery County School System.

The online version of this procedure is official. Therefore, all printed versions of this document are unofficial copies.

### **2.0 RESPONSIBILITY:**

- 2.1 Director of Continuous Improvement

### **3.0 APPROVAL AUTHORITY:**

- 3.1 Chief Communications Officer

### **4.0 DEFINITIONS:**

- 4.1 CIS: Continuous Improvement System (CIS) – referred to as Education Organization Management System in ISO 21001:2018.
- 4.2 Concern: an issue, finding, or potential nonconformance. To be classified by the Director of Continuous Improvement as Corrective Action, Correction, or Recommendation for Improvement.
- 4.3 Process and Implementation Evaluations: An internal audit engagement conducted outside of the annual assurance audit engagement schedule, requested by a department chief, designee, or the Director of Schools based on the results of prior audits or stakeholder feedback. The scope of the evaluation and report distribution is agreed upon by the requestor and Director of Continuous Improvement before the engagement occurs.
- 4.4 Internal Audits: Audits conducted to determine if the CIS of the Clarksville-Montgomery County School System conforms to the requirements of ISO 21001:2018 and/or to determine if the district's policies, procedures, and practices support effective and efficient operations.
- 4.5 Internal Auditors: CMCSS employees selected to perform internal continuous improvement audits. Internal auditors attend annual auditor training, pass/meet the competency test/requirements and are objective and impartial. All internal auditors must read, understand, acknowledge and comply with a Code of Ethics annually.
- 4.6 Lead Auditor: CMCSS employee selected to perform and manage internal continuous improvement audits. The lead auditor is central point of communication for the audit team and provides direction throughout the course of the audit. The lead auditor attends annual auditor training, passes/meets any competency tests/requirements and is objective and impartial. All internal auditors must read, understand, acknowledge and comply with a Code of Ethics annually.



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### **5.0 PROCEDURE:**

- 5.1 A Department Chief or designee may request an evaluation for various purposes. These requests must be made in writing to the Director of Continuous Improvement. Requests should be made on the basis of previous audit results, stakeholder feedback, or similar metrics.
- 5.2 The Director of Continuous Improvement obtains further information from the department requestor regarding requested scope of the audit and evaluates knowledge and resource requirements.
- 5.3 After consideration of knowledge and resource requirements, the Director of Continuous Improvement decides whether the audit may be conducted and the determined necessary timelines. The Director of Continuous Improvement will communicate these decisions to the department requestor.
- 5.4 When conducting an evaluation, the audit team will use any of the audit tools deemed necessary to conduct the evaluation, but will primarily rely on the use of protocols created by the Director of Continuous Improvement. These protocols may include those for Process Implementation, Program Theory, etc.
- 5.5 Auditors perform the evaluation under the direction of the Lead Auditor, who will assign portions of the evaluation to team members to ensure an efficient and effective audit.
  - 5.5.1 Internal auditors conduct the audit in accordance with training provided by the Director of Continuous Improvement
  - 5.5.2 Internal auditors will report any concerns to the Lead Auditor.
  - 5.5.3 All auditors must agree on any findings, whether the findings are deemed compliant, non-compliant, or recommendation for improvement. If there is disagreement regarding findings, the Lead Auditor will contact the Director of Continuous Improvement to determine the outcome of the dispute.
  - 5.5.4 All auditors must submit their work papers to the Lead Auditor, who will ensure all work papers are sourced prior to meeting with Director of Continuous Improvement.
  - 5.5.5 At the completion of the audit, the Lead Auditor submits all audit work papers to the Director of Continuous Improvement.
  - 5.5.6 The Lead Auditor will discuss documented concerns with the Director of Continuous Improvement, who will classify concerns into any of the following categories – Corrective Action, Correction or Recommendation for Improvement.
- 5.6 At the conclusion of the evaluation, the Lead Auditor prepares the Internal Audit Report to be presented at the closing meeting. The draft report is submitted to the Director of Continuous Improvement for review.



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- 5.6.1 Following the Director's review and changes to the draft report (if applicable), the Lead Auditor schedules a closing meeting with the Director of Continuous Improvement, Lead Auditor, and auditee department chief to discuss the findings in the report.
- 5.6.2 After the closing meeting, the Lead Auditor makes any changes agreed upon to the evaluation report before publishing the final report.
- 5.6.3 A copy of the Final Evaluation Report shall be distributed by the Director of Continuous Improvement to the head of the department audited. A copy is not provided to the Director of Schools unless specifically requested by the auditee.
- 5.6.4 The Director of Continuous Improvement shall retain a copy of the final audit report in the CIS files.
- 5.6.5 After the Closing Meeting, the Director of Continuous Improvement will share a survey with the auditee and all internal auditors to collect feedback on the auditing process. This feedback is used to continuously improve the CIS internal audit procedure.
- 5.6.6 The Director of Continuous Improvement will ensure appropriate tracking.

### **6.0 ASSOCIATED DOCUMENTS:**

- 6.1 Internal Auditor Code of Ethics (CIS-F125)

### **7.0 RECORD RETENTION TABLE:**

<u>Identification</u>	<u>Storage</u>	<u>Retention</u>	<u>Disposition</u>	<u>Protection</u>
CI Master Log	Limited Access – Individual Google Drive	On going maintenance	Archive	Back up on server
Any submitted audit work papers (not including Final Report and Compliance)	Electronic or hard copies in CI Coordinator files	2 years after completion of Final Report	Shred	Server back up or locked building/office
Internal Audit Final Report	Limited Access - Shared Network Drive  Hard copy – CIS files	Permanent	None	Server backup or locked office/building



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Internal Audit Compliance documentation	Limited Access - Shared Network Drive  Hard copy – CIS files	Permanent	None	Server backup or locked office/building
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### **8.0 REVISION HISTORY:**

<b><u>Date:</u></b>	<b><u>Rev.</u></b>	<b><u>Description of Revision:</u></b>
12/18/14		Initial Release
1/21/16	A	Updated references to forms.
2/22/18	B	Replaced “management representative” with “director of continuous improvement”.
8/9/21	C	Updates made throughout to reflect changes to the process for consultation engagements, which will follow more of a process evaluation approach based on the feedback collected from internal audits.

**\*\*\* End of Procedure \*\*\***