



## **Internal Audit Report**

Audit Number	A-052
Process or Project	Project Execution
Principal Auditee	John Buttles
Date of Audit	11 February 2025

## 1 Objectives and Scope

The two main objectives of this audit are to evaluate conformity of actions to SRF Operations' QMS and to evaluate compliance of the SRF Operations' QMS to the requirements of the ISO 9001:2015 standard. This will be accomplished by reviewing the identified scope, related documentation, and review of records to obtain objective evidence to determine if any nonconformity or areas of improvement exist in complying with applicable regulatory standards.

The scope of this audit encompasses the QMS documented information, and records related to Project Execution since the previous internal audit (28 Mar 2024).

#### 2 Criteria

Criteria related to this audit includes:

- -ISO 9001:2015 primarily sub-sections of clause 8 Operation.
- -SRF-11-PD-001, SRF-11-PR-001, SRF-11-PR-002 and any other support criteria as documented in the SRF-01-ML-001 SRF Operations Quality Manual.

#### 3 Team Members

Name	Role
Debbie Newman	Lead Auditor

#### 4 Attendees and Contacts

Name	Title or Role
Debbie Newman	Lead Auditor (External)
John Buttles	Process Owner for Project Execution
Ashley Mitchell	Management Representative
Naeem Huque	Design Engineer

#### 5 Checklist and Evidence

A-052 Internal Audit Checklist-Project Execution attached.

#### 6 Results

#### 6.1 Major Nonconformities

The following major nonconformities were identified during this audit. Major nonconformities are considered significant breakdowns in the process. CAPA Reports must be initiated for these.







	Major Nonconformity	Criteria
1	N/A	N/A

#### 6.2 Minor Nonconformities

The following minor nonconformities were identified during this audit. Minor nonconformities are considered marginal deviations or oversights from an otherwise well implemented process. Corrective Action Reports may or may not be initiated for these.

	Minor Nonconformity	Criteria
1	Project execution documentation did	ISO 9001:2015 8.5.1 Control of production and
	not always conform to requirements	service provision
	such as using the correct template,	SRF-11-PD-001 Project Execution 3.7 Project
	accuracy of revision dates, or currency	Register
	of information.	

#### 6.3 CAPA Reports

The following CAPA Reports are initiated to address the nonconformities identified during the audit.

CAPA	Nonconformity(ies)
CAPA-072	Minor-1

#### 6.4 Observations and Comments

The following observations were made during the audit. These are not related to a nonconformity but may provide opportunities for improvement.

- 1. OBS#1 (OFI) There is an opportunity to streamline documentation between SRF-11-PR-001 and SRF-11-PD-001 as some of the information is repetitive.
- 2. OBS#2 (OFI) There is an opportunity to simplify the Document Register to remove columns that are unnecessary, repetitive, or not value added.
- 3. Other than the observations and comments listed above, this audit finds the Internal Audit processes meet the requirements of the audited criteria.

#### 6.5 QMS Process Monitoring Findings

- 1. Number of Opportunities for Improvement (OFIs) identified: 2
- 2. Number of Records not found or not in compliance: 3
- 3. Number of Documents not found or not in compliance: 2

## 7 Audit Report Distribution

- 1. Tony Reilly, SRF Department Head
- 2. John Buttles, Principal Auditee
- 3. Ashley Mitchell, Process Owner of Internal Audit
- 4. DocuShare folder, QMS Records

## 8 Approval

Approved by:	Name:	Signature:	Date:
Principal Auditee	John Buttles	John Buttles  John Buttles (Mar 7, 2025 16:02 EST)	7-Mar-2025







Lead Auditor	Debbie Newman	Delvit Genou	7-Mar-2025
Process Owner of Internal Audit	Ashley Mitchell	Ashley Mitchell Ashley Mitchell (Mar 7, 2025 16:02 EST)	7-Mar-2025
SRF Department Head	Tony Reilly	Tony Reilly Tony Reilly (Mar 24, 2025 08:37 EDT)	24-Mar-2025





## **Internal Audit Checklist**

Audit Number	A-052
Process or Project	Project Execution

## 1 Checklist

	Requirement/Question	Evidence	Notes	Findings (C/Mj/Mn)		
Rev	Review of Prior Audits					
1	NC's from prior audit: 2 Minor captured in CAPA-061	Audit-036 CAPA-061 – Pending verification of effectiveness	CAPA Root cause analysis could be enhanced. CAPA-061 has not yet been completed. This audit did find a similar NC, but the nature of the NC's and root causes is different, thus the NC identified during this audit is not considered a repeat. But, since the CAPA-061 is still open, this audit was not able to determine effectiveness of the actions.	N/A		
2	Status of OFI's from prior audit	Audit-036	There were OFI's identified and many of those improvements were seen during this assessment	С		
Rev	iew of Audit Criteria					
3	ISO 9001:2015 - 8 Subsections	SRF-11-PD-001 Rev 2	This document adequately addresses the applicable ISO 9001 requirements.	С		
4	Review of SRF-01-ML-001 SRF Operations Quality Manual related to the specific process	SRF-01-ML-001 Rev 2	The Quality Manual refers to SRF-11-PD-001 throughout section 8 and appears to be adequate for the organization.	С		
5	Review of SRF-11-PD-001 Project Execution Program Description	SRF-11-PD-001 Rev 2	The Program Description refers to authorization of work and changes, initiation of work, planning, product and data delivery, project closeout and project register.	С		
6	Review of SRF-11-PR-001 Project Execution	SRF-11-PR-001 Rev 4	OBS#1 There is repetitive information in this document and SRF-11-PD-001	С		
7	Review of SRF-11-PR-002 Work Control Document Register	SRF-11-PR-002 Rev 2	The WCD Register procedure appears to describe the process as intended.	С		





	Requirement/Question	Evidence	Notes	Findings
	• •		Notes	(C/Mj/Mn)
	iew Objective Evidence in su		T	Τ
8	Review of SRF-11-RG-001 Project Register	SRF-11-RG-001 Rev 5 - Last modified 01Nov2024	There are 7 projects. The most recent projects are the EIC591SC and EIC197.	С
9	Review of SRF-07-FM-006 Process Register Templates	SRF-07-FM-006 Rev 1	The Process Register Template being used is the currently controlled revision.	С
10	Review of AWP Annual Work Planning Staffing Module	1/14/2025 Management Review Report	Management review includes resource distribution and project execution metrics. The actual AWP Staffing Module is only accessible to Sr. Leadership and some of the information is shared in Management Review.	С
11	Do Ops Project Coordinators need specific training?	09Aug 2024 Naeem Competence Acknowledgement Form for Project Coordinator  14Aug 2024 David Competence Acknowledgement Form for Project Coordinator	Project Coordinators do have specific training. The records were reviewed and complete.	С
12	Review examples of project closeout activities incl: lesson learned report and closeout report	SNS PPU Closeout Report 3/31/2024 SNS PPU Lessons Learned 9/30/2024	There was only one example of a closed project, and the evidence was thorough and comprehensive.	С
13	Review the use of Project DocuShare Folders	Project reviewed below	The projects reviewed during this audit had extensive documents in the DocuShare Folders. Use of the software to retain records appeared to work well for the organization.	С
14	Review of projects for the Project Execution Plan, Vendor Requirements, Production Requirements, Project Acceptance Criteria	EIC591SC - David S Project Coordinator -Project Execution Plan Rev 1 -Project Document Register Rev 1 -Records Register Rev 1 -Acceptance Criteria – none created yet -WCD Register – none created yet	Minor NC#1 - EIC591SC utilized an old PEP template. There are conflicting revision dates on the Document Register. EIC197 utilized an old PEP template. The WCD Register for EIC197 does not correlate to the travelers that are already created.  OBS#2 - Consider updating the Document Register to remove unnecessary columns.	Mi





	Requirement/Question	Evidence	Notes	Findings (C/Mj/Mn)		
		EIC197 - Naeem H Project Coordinator -Project Execution Plan Rev 1- includes acceptance criteria -Project Document Register Rev 1 -Records Register Rev 1 -Acceptance Criteria Document 10/27/2022 -WCD Register Rev 1-		(c) iij) iiii)		
15	Review Travelers for consistency of information – are procedures referenced in the travelers?	C100R-CMA-CAV-DISA Rev 3 C100R-CLNRM-CAV- ASSY Rev 4 - Traveler did not link to the Cavity Installation into Test Stand procedure Rev 2	The auditor found that C100R-CLNRM-CAV-ASSY Rev 4 - Traveler did not link to the Cavity Installation into Test Stand procedure Rev 2 - Auditee stated this is a known issue and a CAPA is being generated. This audit will not generate a NC since this is a known issue and is already being addressed.	С		
16	Review of WCD Register SRF-11-FM-005	SRF-11-FM-005 rev 3	The WCD Register Template is currently at rev 3 which is accurately controlled.	С		
17	Review examples of scope changes	L2HE-CHEM-BLA-DEGR- New traveler L2HE WCD Register	There were no significant scope changes. One minor BLA change that resulted in new travelers was reviewed.	С		
18	Review Product and data delivery aspects such as Acceptance Criteria Report, Authorization for release.	C100R—05R - Authorization for Release Information 26Jun2024 C100R-10R Authorization for Release Information 26Jun2024 -2L26 Commissioning Summary 6/26/2024 -L2HE-J24 Authorization for Release 05Dec2024	Authorization for Release and Acceptance Criteria appeared to be well documented and appropriate for the projects reviewed.	С		
19	Is there access control to Project DocuShare folders?	Permissions DocuShare functionality	Most users have the ability to ready only except for guests. Process owners and management have full read and write access. Permissions can be modified as needed.	С		
	Program Monitoring Method					
20	Resource Distribution	1/14/2025 Management Review	Information only	С		





	Requirement/Question	Evidence	Notes	Findings (C/Mj/Mn)
21	Project Planning	1/14/2025	Information only - 97%	C
	Participation	Management Review		
22	Project Authorization for	1/14/2025	Information only - 100%	C
	Release Participation	Management Review		
21	Project Closeout Activity	1/14/2025	Information only - 100%	C
	Participation	Management Review		

## 2 Objective Evidence

N/A

## 3 Approvals

Approved by:	Name:	Signature:	Date:
Lead Auditor	Debbie Newman	Delibi Leman	7-Mar-2025

# A-052 Internal Audit Report\_Checklist-Project Execution

Final Audit Report 2025-03-24

Created: 2025-03-07

By: Allen Samuels (samuels@jlab.org)

Status: Signed

Transaction ID: CBJCHBCAABAAQgpNT5DVTmxJB-N\_5meHXnLnCiTNM17M

## "A-052 Internal Audit Report\_Checklist-Project Execution" History

- Document created by Allen Samuels (samuels@jlab.org) 2025-03-07 8:57:41 PM GMT
- Document emailed to John Buttles (buttles@jlab.org) for signature 2025-03-07 8:57:47 PM GMT
- Document emailed to Debbie Newman (newman114@yahoo.com) for signature 2025-03-07 8:57:47 PM GMT
- Document emailed to Ashley Mitchell (ashleya@jlab.org) for signature 2025-03-07 8:57:47 PM GMT
- Document emailed to Tony Reilly (areilly@jlab.org) for signature 2025-03-07 8:57:47 PM GMT
- Email viewed by Tony Reilly (areilly@jlab.org) 2025-03-07 8:58:06 PM GMT
- Email viewed by Ashley Mitchell (ashleya@jlab.org) 2025-03-07 8:58:16 PM GMT
- Email viewed by John Buttles (buttles@jlab.org) 2025-03-07 8:58:23 PM GMT
- Document e-signed by Ashley Mitchell (ashleya@jlab.org)
  Signature Date: 2025-03-07 9:02:16 PM GMT Time Source: server
- Document e-signed by John Buttles (buttles@jlab.org)
  Signature Date: 2025-03-07 9:02:56 PM GMT Time Source: server



Email viewed by Debbie Newman (newman114@yahoo.com) 2025-03-07 - 9:21:32 PM GMT

Document e-signed by Debbie Newman (newman114@yahoo.com)

Signature Date: 2025-03-07 - 9:21:52 PM GMT - Time Source: server

Email viewed by Tony Reilly (areilly@jlab.org)

2025-03-22 - 3:27:21 PM GMT

Document e-signed by Tony Reilly (areilly@jlab.org)

Signature Date: 2025-03-24 - 12:37:14 PM GMT - Time Source: server

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2025-03-24 - 12:37:14 PM GMT