APROVED,
EXECUTIVE DIRECTOR
Ing.

BOGDAN RADULESCU

TECHNICAL COMMITTEE
AGREEMENT

Meeting Minutes No.:163 / 19.09.2023

EVALUATION OF RO-NANDTB ACTIVITIES
COD: RO-NANDTB 06

Rev.: 1 from 18.09.2023

Synthesis: New Procedure

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RECORD OF CHANGES			
Ed.	Modification	Modified by:	Date

1. SCOPE

This procedure describes the external audit process conducted by oversight organizations to assess the processes carried out by RO-NANDTB, verify the framework and applicable principles for conducting this activity, and assess the effectiveness of corrective actions through internal audits.

2. APPLICABILITY

This procedure applies to external audits conducted at RO-NANDTB by third-party audit organizations or regulatory bodies such as NADCAP, as well as to internal audits conducted to analyze how non-conformities received from external audits are handled and to establish compliance with their own management system.

3. DEFINITIONS AND ABBREVIATIONS

1.1. DEFINITIONS

Audit - systematic, independent, and documented process aimed to obtain objective evidence to determine the extent to which audit criteria are met.
Auditor - person conducting an audit.
Corrective Action - an action to eliminate the cause of a nonconformity and prevent its recurrence.
Requirement - a need or expectation that is stated, typically implied, or mandatory.
Audit findings - the results of evaluating the audit evidence collected in relation to the audit criteria.
Audit Conclusion - the result of an audit after considering the audit objectives and all audit findings.
Audit Criteria - a set of requirements used as a reference against which objective evidence is compared.
Nonconformity - the failure to meet a requirement that affects the installed system's capability to achieve the intended results

1.2. ABBRREVIATIONS

RO-NANDTB – Romanian National Aerospace Association for Non-Destructive Testing.
NADCAP – National Aerospace and Defense Contractors Accreditation Program.
NDT – Nondestructive Testing.

4. REFERENCE DOCUMENTATION

OP 1105 -Audit procedure
AS 9100 - Quality Management Systems - Requirements for Aviation, Space and Defense Organizations
ISO 19011 - Guidelines for auditing management systems
ISO 9001 - Quality Management Systems

5. PROCEDURE

5.1 EXTERNAL AUDIT

5.1.1 NADCAP Audit

The way in which RO-NANDTB audits Training and Examination Centers is audited by NADCAP.

a) Audit planning
Together with NADCAP scheduling the audit is schedulesd
RO-NANDTB makes the payment of the required fees 45 days before the audit.

b) Audit preparation
At least 4 months before the start of the audit, the Executive Director checks the audit purpose on the NADCAP website, www.eAuditNet.com, and downloads the specified audit criteria in Word format:

-AC7000 -NADCAP audit criteria for NADCAP accreditation
-AC7114 -NADCAP audit criteria for NDT
-AC7114/11 -Audit criteria for National Aerospace Boards

The Executive Director, together with the designated members of the Technical Committee, conducts a self-audit on all the checklists mentioned above. For each question, in addition to marking Y/N, they complete the RO-NANDTB procedure reference where the answer can be found (procedure code, paragraph, etc.), and if necessary, provide additional explanations to justify the response.
During the self-audit, special attention will be given to the section of the checklists related to audit preparation, specifically the instructions for auditees. All the documents indicated for upload to the site and the documents to be presented during the audit will be prepared and uploaded in the eAuditNet.com.
After completing the self-audit, the Executive Director checks whether all questions have been answered appropriately and if any non-conformities or deficiencies have resulted from the requirements stated in the checklist.
All non-conformities identified during the self-audit will be corrected by revising the affected RO-NANDTB procedures in accordance with the requirements of RO-NANDTB 01 - Documents Control.

At least 30 calendar days before the start of the audit, the completed applicable audit checklists, RO-NANDTB procedures, and all indicated documents will be uploaded to the website www.eauditnet.com.

c) Conducting the audit

The Executive Director, together with the audit team consisting of Level 3 personnel from organizations holding Training and Examination Centers, participates in the opening meeting and during the audit, providing support throughout the audit, promptly addressing non-conformities and recommendations that can be resolved through immediate corrections and actions.
During the closing meeting, they either agree with the non-conformities raised by the auditor or explain RO-NANDTB's perspective on non-conformities where there is no agreement.

d) After audit

The Executive Director, along with the audit team, formulates the corrective actions necessary for acceptance by NADCAP to obtain accreditation. They submit the proposals for corrective actions to NADCAP, adhering to the deadlines received through www.eAuditNet.com.
Subsequently, upon acceptance by NADCAP, the non-conformities and established corrective actions are uploaded into the 'Non-conformities and Corrective Actions' database by the designated internal audit responsible person and are verified for effectiveness during the internal audit, in accordance with paragraph 5.2.

5.2 INTERNAL AUDIT

Annually, in January, an internal audit of the RO-NANDTB system will be conducted, addressing the compliance of RO-NANDTB activities with its own procedures.
The Executive Director of RO-NANDTB will appoint an audit team from the members of the Technical Committee to carry out the internal audit. To conduct the internal audit, auditors must have completed a course for one of the standards AS9100, ISO9001 or ISO19011.

5.2.1 Auditor

Will allocate a number from the 'Audit Record Register' Form 6 in RO-NANDTB 05 and prepare the audit plan.
Will verify the compliance of activities and processes conducted with the procedures specified in RO-NANDTB 01, Independent Annex 1 - List of issued documents.
The auditor will analyze how the activities required for preparing the NADCAP audit, as described in paragraph 5.1.1 b), were conducted.
Will verify how the corrective actions and improvement opportunities resulting from previous audits were implemented and their effectiveness, if applicable.
Will issue a non-conformity report for the identified nonconformities and present them to the Executive Director of RO-NANDTB, using Form 5 in RO-NANDTB 05.
Will prepare and sign the audit report using Form 4 in RO-NANDTB 05.
Will archive the entire audit documentation at the RO-NANDTB headquarters, using the Form 7 in RO-NANDTB 05.

All internal and external non-conformities shall be recorded in an Excel file - 'Non-conformities and Corrective Actions Database' for monitoring purposes.

Non-conformities and Corrective Actions Database

Nr. Crt.	Auditing organisation	No and date of report	Nonconformity description	Nonconformity classification	Corrective actions	Effectivity date	Responsible	Responsible for Effectiveness Verification of Corrective Actions	Verification date	Effective Corrective Action [Y/N]	Internal Audit Report Number

5.2.2 The Executive Director of RO-NANDTB

Together with the members of the Technical Committee, the executive director will conduct a root cause analysis and establish corrective actions for the received non-conformities, decide on the responsible parties for implementing corrective actions, and set deadlines for their implementation.
The Executive Director, in collaboration with internal auditors, determines, based on the type of non-conformities and corrective actions decided upon, the frequency at which the effectiveness of their implementation will be verified.

5.3 VERIFICATION OF CORRECTIVE ACTION EFFECTIVENESS

The verification of corrective action effectiveness is carried out by the auditor, as agreed upon with the Executive Director, after a minimum of 6 months and a maximum of 12 months from implementation.
The non-conformity is considered closed when, following the verification of the effectiveness of corrective actions, it is determined that the proposed actions have been effective, and no recurrence or new non-conformity has been identified.