INTERNAL AUDIT CHECKLIST
DOCUMENT CONTROL AND RECORD MANAGEMENT

Audit No._____   Date: _____   Auditor(s):_____

Item	Compliance	Remarks
Has OTML established, implemented and maintained a document and record management system and process that satisfies document control requirements set out in this standard?		
Are controlled documents listed in an electronic document register?		
Is the document register accessible to personnel via the intranet, or in other controlled electronic or hardcopy format where required for use?		
Is responsibility for the control, maintenance and distribution of documentation assigned to an appointed document controller?		
Have hard copy document access points been identified and established?		
Are hard copy documents easily identifiable as current and a distribution list in place and maintained for each document?		
Are external documents sourced for planning and operational purposes registered and current?		
Are records established and maintained to demonstrate compliance with the SHEC IMS and associated policies,		

standards and procedures, and the results achieved?		
Do records contain the appropriate data and information to demonstrate conformance with the measuring and monitoring requirements set out in the SHEC standards?		
Are records accurate, legible, suitably identifiable and traceable throughout for the duration of the required retention period?		
Are systems and processes established, implemented and maintained that clearly specify and support the requirements of OTML's record standard?		
Are medical reports dated and signed by the examining physician, nurse or equivalent?		
Are medical reports legible and include a printed name to assist with identification and authentication of the results or findings?		
Have retention timeframes been established and documented for all records and, at a minimum, meet all legal and regulatory requirements?		
Have OTML sites or projects that are subject to closure or divestment initiated processes for the appropriate management and retention of relevant records for future reference?		
Are records and data maintained at all times in the manner relative to their originating source, and in accordance with		

any applicable data/privacy protection legislation?		
Are the core elements of OTML's SHEC IMS documentation, and their interaction(s) described and developed?		
Does OTML maintain the documents outlined in this standard to describe the minimum requirements, processes and responsibilities for managing activities that have significant SHEC risks?		
Does OTML have standards that document the minimum requirements and controls required to manage activities that are considered to have potential significant risks and/or SHEC impacts, as identified in the corporate risk register?		
Do sites and projects comply with all SHEC standards that are relevant to their specific activities?		
Are SHEC standards reviewed at least every three years and, where required, are revised and reissued?		
Are performance measures assessed in accordance with the requirements of this standard?		

Key:

Exceed Action NA	Requirements with this score exceed obligations. No corrective action required.
Compliant Low Priority	Requirements with this score do not require corrective action. Opportunities for improvement should become a longer term goal once the quality system is established.
Minor N/C Medium	Requirements with this score require corrective action which should become a medium term priority. These are quick wins but you should focus on the major non-conformities first.
Major N/C High Priority	Requirements with this score require corrective action which should become a high priority for rectification. These elements should be corrected by ensuring full implementation and documentation.
Major N/C Immediate	Requirements with this score require corrective action which must become an immediate priority. These elements must be corrected through process implementation and documentation.