

# IC3S


## **Internal Audit**

(STQC/CC/P03)

Issue : 03




CC Certification Body, STQC Directorate,  
Indian Common Criteria Certification Scheme (IC3S),  
MeitY, Government of India  
INDIA

	<b>Indian CC Certification Scheme</b>	
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## 0.1 Approval and Issue

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**Reviewed by : Management Representative**

**Approved by : Head, CC Scheme**

### Note:

- Management Representative is responsible for issue and distribution of this document including amendments.
- Holder of this copy is responsible for incorporation of all the amendments and currency of the document.



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## 1.0 Purpose and Scope


The purpose of this document is to establish procedures for carrying out internal audit of all certification functions of IC3S, verify their compliance with requirements and evolve suitable means to improve the effectiveness of such functions.

## 2.0 Responsibility

Management Committee & Head, CC Scheme	- Review the results of Internal Audits and decide on appropriate actions
Management Representative	- Plan &organise Internal Audits, briefing the audit team and co-ordination of corrective actions and follow up
Audit Team	- Audit of certification functions as defined in the scope, against planned arrangements and report to MR.
Auditee	- Responsible for corrective actions within prescribed time frame

## 3.0 Associated Documents

ISO/IEC Guide 2	- Standardization and related activities - General vocabulary
ISO/IEC 17065	- General Requirements for Bodies Operating Product Certification Systems
CCRA	- Arrangement on the Recognition of the Common Criteria Certifications in the Field of Information Technology Security.

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ISO/IEC 17025 - General Requirements for the Competence of Testing and Calibration laboratories.

## 4.0 Definitions

### Minor Non-conformity

A single observed lapse or imperfection or weakness in fulfilling a requirement specified in the standard and the Scheme.

### Major Non-conformity

The absence of, or the failure to implement or maintain a requirement, or objective evidence of a situation that would raise significant doubts as to the capability of the organization to achieve its objectives.

## 5.0 Resources

For the purpose of internal auditing, STQC personnel who:

- Is empaneled auditor / Lead Auditor under STQC IT Certification Schemes
- Has auditing experience of at least 3 years and possess adequate qualification and training in auditing practices and
- Has understanding of IC3S process and requirement.


## 6.0 Procedure

### 6.1 Audit plan

6.1.1 Management Representative will prepare a plan for carrying out Internal Audit. While planning, it is kept in mind that each function will be audited at least once a year and cumulatively, the internal audits in a year cover all relevant procedures.

6.1.2 Management Representative, while assigning the resources for auditing, will ensure that auditors are independent of those having direct responsibility of the functions being audited.

6.1.3 In addition to the scheduled internal audits, special audits may also be organised depending upon the necessity for such audits.

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6.1.4 Management Representative will communicate the plan to all concerned including modifications, if any.

## 6.2 Audit scope

6.2.1 Unless otherwise specified, the scope of each internal audit includes audit against the requirements of all applicable documents/procedures for each function identified in the audit plan.

6.2.2 In case of special audits, the management representative will identify the desired scope prior to each special audit.

## 6.3 Audit execution

6.3.1 The audit team chosen, will carry out the audit at the designated time and place and submit its report in form STQC/CC/F06.

6.3.2 During the audit, the team records its observations in sufficient details in form STQC/CC/F12 as evidence of compliance of the certification functions against planned arrangements.

6.3.3 Before submitting the report, the relevant part of the content pertaining to specific functions are discussed with the personnel responsible for such functions to apprise them of the findings and recommendations of the team.


6.3.4 Details of non-conformity observed during the audit are recorded in form STQC/CC/F13 giving specific reference/objective evidence to documents, records and discussions. Audit team may suggest/recommend improvements in the existing methods/procedures.

6.3.5 After assessing the impact of a non-conformity, the team will classify the non-conformity as major/minor. In case of major non-conformity, the team will bring it to the notice of Head, CC Scheme without delay, who in turn will initiate immediate actions to clear the non-conformity on priority and prevent recurrence.

6.3.6 In case of minor non-conformity, the team will further classify it as per the guidelines available in form STQC/CC/F13 itself, so as to provide clarity on the non-conformity to the auditee.

## 6.4 Audit reports

6.4.1 The audit team prepares an audit report on the functions audited and submits it to the Management Representative.

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6.4.2 The report contains: -

- Audit brief and summary in form STQC/CC/F06
- Audit noting & Audit non-conformity report in form STQC/CC/F12 & F13
- Check list/additional information if any enclosed separately

6.4.3 The audit reports are numbered serially in a year as follows :

XX XX

— —

! !\_\_\_\_\_ Serial No

!\_\_\_\_\_ Year

6.4.4 The audit reports are maintained for a minimum period of five years after which they are reviewed for disposal.

## 6.5 Corrective Action and Follow-up

6.5.1 Auditees are responsible for taking appropriate remedial action against non-conformities identified in their area during the audit and report to Management Representative.

6.5.2 At the conclusion of audit activity, Management Representative apprises the Head CC Scheme of the outcome of each audit and acts on his advice.

## 6.6 Trend Analysis and Review

6.6.1 Management Representative will monitor the effect of remedial actions and carry out a Trend Analysis of occurrence of non-conformities. He will present a cumulative summary of these trends to the Management Committee for review along with the results of each audit.

6.6.2 Management Committee will review the results of each audit as well as the trends and decides on the appropriate course of action.