

Supervising Professional's Monthly Sign-off

Month/Year: _____, Lab _____ in operation this month Yes/No

Required item from CSA A283 clause 5.2.2.2

Describe how Item was accomplished and list all supporting evidence provided to support this item

a) I am fully aware of the operations of the laboratory;

b) I have documented authority to provide oversight of the laboratory operations;

c) I am present in the laboratory on a full-time basis; or available for consultation on a full time basis when the laboratory is in operation.

d) I am not present in the laboratory on a full time basis so I visit the laboratory at a minimum frequency of at least once every 30 days (during the period of operation) and maintain other means of communication with the laboratory between visits;

e) I ensure all employees of the laboratory are adequately trained and certified in good standing;

f) I review documented test procedures semi-annually, with technicians conducting testing;

g) I ensure all equipment is within tolerance requirements and properly calibrated;

h) I review material test results and test reports for accuracy and completeness on an ongoing basis;

i) I review the intra-laboratory proficiency data weekly, when the laboratory is in operation, in accordance with Clause 7; (excluding test results for cylinders not prepared by this laboratory.)

j) I investigate non-conforming results and reports and client/customer complaints;

k) I review certification audit reports and respond to certification agency requests and direction;

l) I ensure that any non-compliances related to the operation of the laboratory, identified through the above reviews and investigation, or through any other means, are effectively addressed and impacted parties advised, in a timely manner;

m) I am able to demonstrate that I maintain membership in good standing with the applicable body responsible for governing the profession;

n) I complete a documented monthly sign-off, confirming the responsibilities in Items a) to m) have been carried out.

Name: _____ Signature: _____ Date: _____

CCIL Notes on CSA A283-19 Clause 5.2.2.2(n) Supervising Professional documented monthly sign off.

CSA A283-19 Clause 5.2.2.2(n) requires that the Supervising Professional (SP) complete a documented monthly sign off. CCIL created a form and recommends its use as noted below. This page gives different examples of evidence to be noted in the form. The form is to be completed by the SP each month.

At each annual audit the CCIL Inspector is to be given a copy of each monthly sign-off form for the period since the previous annual audit and CCIL inspectors will request copies of supporting records referred to in the completed forms as needed. Note that several of these records may also be requested by the inspector as part of the annual audit process, and duplicates are not required. However, the description of the record must be clear as to which record the SP is referring to so the inspector can find the appropriate document.

Below are examples of what could be written on the form in each section.

Simple Yes, No or checkmarks are not acceptable. Dates and written notes including references to other documents are acceptable.

a) I am fully aware of the operations of the laboratory.

- Record/Document the lab activities for the month; or
- Reference a selection of daily records or activities that demonstrate involvement with the laboratory; or
- Reference a diary, record or log of Supervising Professional visits, emails, or phone calls.

b) I have documented authority to provide oversight of the laboratory operations.

- Note the date of the latest version of the Organizational Chart, or
- Note any changes or planned changes to the organizational structure, or
- Reference other company documentation that shows authority of the Supervising Professional.

c) I am present in the laboratory on a full-time basis or available for consultation on a full time basis when the laboratory is in operation.

- Record/Document typical daily contact between the Supervising Professional and the laboratory,
- or

d) if not present in the laboratory on a full time basis, visit the laboratory at a minimum frequency of at least once every 30 days (during the period of operation) and maintain other means of communication with the laboratory between visits;

- List the dates of each month's visit to the laboratory location.

And

- Record/Document communication with lab staff, or
- Reference the log of Supervising Professional emails, and phone calls. or
- Record/Document the dates of lab closures and inactivity

e) I ensure all employees of the laboratory are adequately trained and certified in good standing.

- Trained
 - Reference the training records from this month, or
 - list the technician(s) who were trained on which tests this month, or
 - Reference a defined training program and list of participants
- Certified
 - Record the date of the latest change of staff and the List of Certified Technicians signed by Supervising Professional or
 - list the dates of expiring techs or/and upcoming certification.

CCIL Notes on CSA A283-19 Clause 5.2.2.2(n) Supervising Professional documented monthly sign off.

f) I review documented test procedures semi-annually, with technicians conducting testing;

- Reference Logs that include all certified tests and show at least 2 review dates with each technician, or
- Reference the date of the last review including who attended and what tests were reviewed or
- Reference minutes of the meetings that include the above detail or
- Reference a matrix or table that summarizes the dates of training under e) carried out by the SP, updated monthly and clearly stating if no training occurred during any month.

(CCIL Note: Twice a year each certified test method must be reviewed with each technician. Technicians working less than a full year must participate but may not achieve a review of each method twice during their employment.)

g) I ensure all equipment is within tolerance requirements and properly calibrated;

- Reference date of last internal audit that included equipment, or
- Reference a responsibility matrix that is reviewed monthly with supporting calibration records, or
- List reviewed calibration records for this month, or
- Record the date of review and/or changes of equipment lists, or
- Reference a list of equipment reviews, or
- Reference a log of reviewed records, or
- Reference emails documenting reviews by Supervising Professional

h) I review material test results and test reports for accuracy and completeness on an ongoing basis;

- Reference worksheets and reports with signature or initials and date showing the current months review by Supervising Professional. (Not all reports require SP's signature, enough to show ongoing review each month) or
- Note the dates of the current laboratory closure or
- Note if no testing took place in a given month.

i) I review the intra-laboratory proficiency data weekly, when the laboratory is in operation, in accordance with Clause 7;

- Note the dates of the weekly intra-laboratory Proficiency review or
- Reference weekly records with signature or initial of Supervising Professional or
- reference weekly emails confirming review by SP,

(CCIL Note: excluding test results for cylinders not prepared by this laboratory.)

j) I investigate non-conforming results and reports and client/customer complaints;

- Reference the date of the last non-compliance and complaint and summarize the investigation, findings or corrective action; or
- Reference Noncompliance and complaint forms and logs that include investigation notes by the Supervising Professional or
- Reference the laboratories Quality Management System, if applicable, that includes processes and records for investigation of non-conforming results and reports and client / customer complaints. or
- Reference logs showing investigation by Supervising Professional or copies of emails or phone records or a signed statement indicating that no non-conformances or complaints occurred in the month.

(CCIL Note: CSA does not specify Non Compliance Reports (NCR), if an NCR form is not used, the SP must still show evidence Non-Compliances and Complaints are investigated, effectively addressed and impacted parties advised in a timely manner. In house quality systems covering non-compliance and complaints are acceptable if they show required items listed above. CCIL recommends creating NCR, and Complaint forms.)

CCIL Notes on CSA A283-19 Clause 5.2.2.2(n) Supervising Professional documented monthly sign off.

k) I review certification audit reports and respond to certification agency requests and direction;

- List the date of last audit, or
- Reference the date the current CCIL Compliance Report was signed by the SP, or
- Check the CCIL portal and note the current status of the CCIL Annual Audit (scheduled date, responses to be submitted by, approval date by the inspector) or
- Reference date of other audits the laboratory partakes in (internal, company quality, regulatory)

l) I ensure that any non-compliances related to the operation of the laboratory, identified through the above reviews and investigation, or through any other means, are effectively addressed and impacted parties advised, in a timely manner;

- Summarize communication to parties affected by non-conformances or complaints. (It is understood records of client communication may not be able to be provided to CCIL due to confidentiality.) or
- List parties affected by non-conformances or complaints and dates of communication. or
- Reference forms used above that include this information or
- Reference written procedures or other records that were changed to address non compliances or complaints.

(CCIL Note: Records or Forms are to include sections to describe how the issue was addressed and who was impacted by and notified of the issue, as under j) above, and following annual audit a copy of the compliance report with responses submitted by the SP.)

m) I am able to demonstrate that I maintain membership in good standing with the applicable body responsible for governing the profession;

- Note the date that annual membership fees were paid. or
- Reference a saved current screen shot including date and status from applicable body responsible for governing the engineering profession in the province where the laboratory is or
- Reference a membership card showing expiry date, if issued.

(CCIL Note: The original certificate is not applicable here as this does not confirm current status.)

n) I complete a documented monthly sign-off, confirming the responsibilities in Items a) to m) have been carried out.

- Print and Sign the completed Supervising Professional's Monthly sign-off form, or
- Digitally complete and sign the form with a program that allows signatures to be locked / secured / traceable to the SP.