|  |  |  |  |
| --- | --- | --- | --- |
| Send completed worksheet to Auditor, Auditor’s Supervisor, and [FVAudits@ams.usda.gov](mailto:FVAudits@ams.usda.gov) (Federal Auditors) or the appropriate Federal Program Manager (Fed-State Auditors) | | | |
|  | | | |
| **Auditor name:** | **Auditor’s Role:** | **Audit End Date:** | |
| Click here to enter text. | Auditor  Team Leader  Team Member | Click here to enter a date. | |
| **Evaluator Name:** | **Evaluation Type:** | **Service Type :** | |
| Click here to enter text. | Desk  Witness | Process  System | |
| **Applicant name:** | **Service Location:** | | |
| Click here to enter text. | Click here to enter text. | | |
| **Audit Service:** | **Scope of audit (include elements audited):** | | |
| Click here to enter text. | Click here to enter text. | | |
|  | | | |
| ***Preliminary Rating****: Determine a Preliminary Rating for each element, providing written justification for each rating. Use the Element Criteria evaluation on the subsequent pages to determine the Preliminary Rating.*  *The rating levels consistent of: “***A**” – Acceptable  “**N**” – Needs Improvement “**U**” – Unacceptable, and  “**NA**” – Not Applicable. | | | |
|  | | | |
| **Rating Elements** | | | **Preliminary Rating:** |
| 1. **Subject Knowledge** | | | Choose an item. |
| 1. **Planning and Preparation** | | | Choose an item. |
| 1. **Document Adequacy Review** | | | Choose an item. |
| 1. **Onsite Assessment** | | | Choose an item. |
| 1. **Preparing and Distributing Audit Report** | | | Choose an item. |
| 1. **Follow-up Activities** | | | Choose an item. |
| 1. **Professionalism** | | | Choose an item. |

|  |  |  |
| --- | --- | --- |
| ***Overall Rating****: Indicate the Overall Rating with the appropriate classification, listed below. Provide written justification for the rating.*  ***Acceptable*** *=* *All Elements are either rated “Acceptable” or “Needs Improvement”. Any element rated “Needs Improvement”, in the opinion of the evaluator, does not compromise the integrity of the audit program.*  ***Unacceptable*** *= At least one element is rated “Unacceptable” or numerous elements are rated “Needs Improvement”, and thereby, in the opinion of the evaluator, compromise the integrity of the audit program when considered in their totality.* | | |
|  | | |
| **Overall Rating:** | **Justification Summary:** | |
| Choose an item. | Click here to enter text. | |
|  | | |
| **Auditor Signature** (electronic signature permissible) | | **Date**  Click here to enter a date. |
| **Evaluator Signature** (electronic signature permissible) | | **Date**  Click here to enter a date. |

| **Auditor name:** | Click here to enter text. | **Audit End Date:** | Click here to enter a date. | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **AMS Auditor Evaluation Worksheet – Element Criteria** | | | | **A\*** | **N\*** | **U\*** | **N/A\*** |
| 1. **Subject Knowledge** | | | |  |  |  |  |
| 1. Understand and apply specific requirements of the AMS audit or accreditation program being audited. | | | |  |  |  |  |
| 1. Understand, apply, and reference documents *(guidance, instructions, policies, procedures)* applicable to the AMS. | | | |  |  |  |  |
| 1. Perform audit activities in accordance with audit principles, policies and procedures applicable to the specific program. | | | |  |  |  |  |
| 1. Understand and is familiar with the industry being audited *(jargon, common practices, equipment, and tools)*. | | | |  |  |  |  |
| **Comments:** | | | | | | | |
| Click here to enter text. | | | | | | | |
| 1. **Planning and Preparation** | | | |  |  |  |  |
| 1. Appoint the audit team leader, select audit team, and assign work, as applicable. | | | |  |  |  |  |
| 1. Identify resources required for the audit. | | | |  |  |  |  |
| 1. Determine feasibility of audit and make cost effective travel arrangements. | | | |  |  |  |  |
| 1. Establish initial contract and arrange for the audit with the auditee. | | | |  |  |  |  |
| 1. Prepare an accurate and complete audit plan and other necessary documents. | | | |  |  |  |  |
| **Comments:** | | | | | | | |
| Click here to enter text. | | | | | | | |
| 1. **Document Adequacy Review** | | | |  |  |  |  |
| 1. Review documents accurately and efficiently. | | | |  |  |  |  |
| 1. Complete within the agreed time schedule. | | | |  |  |  |  |
| **Comments:** | | | | | | | |
| Click here to enter text. | | | | | | | |
| 1. **Onsite Assessment** | | | |  |  |  |  |
| 1. Conducted a well-organized opening meeting. | | | |  |  |  |  |
| 1. Introduce team. | | | |  |  |  |  |
| 1. Restate purpose and scope of audit. | | | |  |  |  |  |
| 1. Identify auditee representative and communication channels. | | | |  |  |  |  |
| 1. Inform auditee that they will be kept aware of audit progress. | | | |  |  |  |  |
| 1. Confirm that needed resources and facilities are available. | | | |  |  |  |  |
| 1. Explain the conditions under which the audit will be terminated. | | | |  |  |  |  |
| 1. Explain that audit findings and associated information is releasable under FOIA. | | | |  |  |  |  |
| 1. Explain the audit appeal process. | | | |  |  |  |  |
| 1. Understand and clearly identify audit team roles, responsibilities and timeframes. Facilitate an effective and efficient audit. | | | |  |  |  |  |
| 1. Controlled the audit effectively: lead the audit team in communications with the auditee, reach audit conclusions and prevent and resolve conflicts. | | | |  |  |  |  |
| 1. Communicated (both orally and in writing) in a clear, concise and understandable manner. Vocabulary, tone and style were adapted to the individual or group to whom they were addressing. | | | |  |  |  |  |
| 1. Resolve any disputes diplomatically, tactfully and quickly. | | | |  |  |  |  |
| 1. Observe and be actively aware of physical surroundings and activities. | | | |  |  |  |  |
| 1. Review records and verify audit evidence. | | | |  |  |  |  |
| 1. Ask open-ended questions to effectively acquire information. | | | |  |  |  |  |
| 1. Follow auditee company’s policies and safety procedures at all times. | | | |  |  |  |  |
| 1. Collect and verify information pertaining to the audit (or coordinated the collection and verification of information). | | | |  |  |  |  |
| 1. Based audit findings on verifiable evidence available within the scope of the audit. Contribute to audit findings (team member). | | | |  |  |  |  |
| 1. Decisively and accurately classified audit findings based on the severity, frequency of occurrence, and risks associated with the findings. | | | |  |  |  |  |
| 1. Inform auditee representative of audit findings, as they are noted. | | | |  |  |  |  |
| 1. Conduct a well-organized closing meeting that: | | | |  |  |  |  |
| 1. Present the audit findings and conclusions in a manner that is clear and understandable to the auditee. | | | |  |  |  |  |
| 1. Provide the auditee an opportunity to ask questions on any audit findings. | | | |  |  |  |  |
| 1. Reiterate observations that require further guidance and consideration from AMS. | | | |  |  |  |  |
| 1. Explain the audit appeal process. | | | |  |  |  |  |
| 1. Encourage the auditee to provide feedback on the quality of service received from AMS. | | | |  |  |  |  |
| **Comments:** | | | | | | | |
| Click here to enter text. | | | | | | | |
| 1. **Preparing and Distributing the Audit Report** | | | | | | | |
| 1. Audit documentation, checklist and audit notes are accurate, complete, neat, and provide sufficient information to prepare the report. | | | |  |  |  |  |
| 1. Prepares an audit report that: | | | |  |  |  |  |
| 1. Objectively and accurately document the results of the audit. | | | |  |  |  |  |
| 1. Is checked for spelling, and grammatically correct. | | | |  |  |  |  |
| 1. Is submitted within established timeframes. | | | |  |  |  |  |
| 1. Is distributed to the appropriate persons. | | | |  |  |  |  |
| 1. Audit documentation is properly filed, stored, or disposed. | | | |  |  |  |  |
| **Comments:** | | | | | | | |
| Click here to enter text. | | | | | | | |
| 1. **Follow-up Activities** | | | |  |  |  |  |
| 1. Assess corrective actions according to program requirements within established timeframes. | | | |  |  |  |  |
| 1. Submitted audit charges and travel vouchers, as appropriate. | | | |  |  |  |  |
| **Comments:** | | | | | | | |
| Click here to enter text. | | | | | | | |
| 1. **Professionalism** | | | |  |  |  |  |
| 1. Acted professionally with the highest degree of ethical conduct *(honesty, integrity and impartiality)*. | | | |  |  |  |  |
| 1. Maintain confidentiality and security of information learned during the audit. | | | |  |  |  |  |
| **Comments:** | | | | | | | |
| Click here to enter text. | | | | | | | |

|  |
| --- |
| **\*Element Criteria Rating Guidance:** |
| **Acceptable (A)** means that performance in this area is generally effective and practices are consistently demonstrated at an acceptable level. The employee maintains an adequate scope of personal and professional qualities and performs additional responsibilities as assigned. |
| **Needs Improvement (N)**means that performance in this area meets *minimum requirements but needs improvement* because practices are not consistently demonstrated at an acceptable level. |
| **Unacceptable (U)** means that performance in this area is ineffective and requires improvement to attain a minimum level of competency. |
| **Not Applicable (N/A)** means that performance in this area was not observed and cannot be rated. |