

# Audit Report (Stage 1)

Organisation: NIRMALA MEMORIAL FOUNDATION

Audits (ZA):



## Master Data of Organisation

Name of Organisation	NIRMALA MEMORIAL FOUNDATION	
Name of corporate group (in case of group certification)	-	
Street	90 FEET ROAD, ASHA NAGAR, THAKUR COMPLEX, KANDIVALI (EAST)	
Postcode / Town / Country	400101 / Mumbai / India	
Contact	Ms Sumathi Rajkumar	
E-Mail	principalnirmalacollege@gmail.com;	
Phone/Fax	022-28549303	
Language	English	
Scope Description	Offering Degree college courses for Commerce, Management, Mass Media, Information technology and Computer Science meeting requirements of University of Mumbai. Offering Post Graduate courses M.Com, M.Sc. IT meeting requirements of University of Mumbai.	
	<input type="checkbox"/> more description regarding scope in annex	
Industry / Scope (EA, TA, ...)	37.0	

## Audit profile

Standards under contract / Audit type	ISO 9001 : 2015 Certification audit Stage1	---	:
	---	:	---
System documentation: Revision / Issue	Quality Manual – Documented Information – DI Issue no. 01 dt. 18.11.2019 Rev 01 dt 21.01.2021		
Surveillance mode	Yearly surveillance		
Audit team leader / responsible	Kiran Dhavale		
Audit team	-		
Technical expert	N.A.		
Trainee	N.A.		
Multisite-organisation	All sites are listed in: <input checked="" type="checkbox"/> Audit Reference Data Sheet <input type="checkbox"/> separate Listing <input checked="" type="checkbox"/> Audit program/ATEA <input type="checkbox"/> Multisite-certification (Sample)		
Shift operation	Single shift operations		

# Audit Report (Stage 1)

Organisation: NIRMALA MEMORIAL FOUNDATION

Audits (ZA):



Details for Stage 1 - Audit		
Stage 1 - Audit	Kandivali, Mumbai	
Duration Stage 1 - Audit	ISO 9001 : 2015 :	1.00 person-day (s) 0,00 person-day (s) 1.00 total
Date Stage 1 - Audit	16.02.2021	
Remote Auditing (ICT) tools used, if any	<input type="checkbox"/> Skype <input checked="" type="checkbox"/> MS Teams <input type="checkbox"/> Webex <input type="checkbox"/> Zoom <input type="checkbox"/> Google Meet <input type="checkbox"/> Others : Please specify Not applicable . Audit on-site.	

Audit Result			
<b>System documentation</b>			
The system documentation was reviewed with the following result: There are few areas which need to be included in the documentation in line with the ISO 9001:2015 requirements. Quality Management System Manual has been prepared in line with the clauses of the current version. Issues/ Context, Risks/ Opportunities, Interested parties' requirements, internal audits and management review have been referred in QMS Manual – DI Issue No. 01 Rev 01 dated 21.01.2021. The QMS scope documentation , Internal/External issues, Interested parties and their requirements, Quality policy communication, risk/opportunities action plans , setting Quality objectives, monitoring and measuring resources and documented operatoanl controls needs updation. ( Ref IAC points)			
ISO 9001:2015 Not Completely Fulfilled	not applicable	not applicable	not applicable
<input type="checkbox"/> q.v. enclosed checklist(s) for system documentation			
<b>Readiness</b>			
Relevant areas of the organisation were visited during a tour of the site and individual employees were asked about their activities and the management system on a random sample basis in order to gain an impression of employee awareness.			
ISO 9001:2015 Fulfilled	not applicable	not applicable	not applicable
<b>Internal audits and assessments of the management system</b>			
Planning and implementation of the internal audit and the management system reviews were checked using the available documented information. Procedure for internal audits ( section in Quality Manual ) and process for management reviews ( section in Quality Manual ) made. Audit schedule of internal audit in 19-20 released for 1 cycle and audits in March 2020 were conducted . 2 NCs reported in March 2020 audit cycle and NCs closed. For 2020-21 internal audit cycle to cover core areas. Audit coverage ( relevant areas / clauses ) and proper reporting by auditors in audit report to be addressed in new audit cycle . Management review conducted on 02.02.2021.Agenda points covered comprehensively in the review. ( Ref IAC points)			
ISO 9001:2015 Not Completely Fulfilled	not applicable	not applicable	not applicable

# Audit Report (Stage 1)

Organisation: NIRMALA MEMORIAL FOUNDATION  
Audits (ZA):



**If individual requirements have been assessed as "identified areas of concern", the areas of concern are described in more detail in the "detailed results" section.**

## Recommendation of audit team: Result

- The audit team is convinced that the Stage 2 - Audit can be performed as planned without limitations.
- The audit team is convinced that the Stage 2 audit can be performed as planned - the organisation must ensure, however, that the areas of concern which have been identified have been effectively corrected at the planned date.
- The audit team is convinced that effective correction of the areas of concern which have been identified must be verified before the Stage 2 - Audit (repeat Stage 1 - Audit).


## Recommendation of audit team: Plan for stage 2 (duration, team, sites etc..)

The comments regarding the Stage 2 - Audit and the surveillance program were drawn up based on the results of the above audit activities.

- The audit team is convinced that the comments on the Stage 2 - Audit are correct (No certification decision is required).
- The audit team identifies any significant changes which would impact the management system during the Stage 1 - Audit. The Certification Body decides whether the entire stage 1 or part of stage 1 has to be repeated.

Review and approval by Certification Body       /       /       /

Further comments in annex

Date: 16.02.2021 Name: Kiran Dhavale	 Signature
---	---

## Statement of the Certification Body

Statement regarding the proposals of audit team for the Stage 2 Audit

The recommendations of audit team are accepted

Continued in an annex

Date: Name:	Signature
----------------	-----------

# Audit Report (Stage 1)

Organisation: NIRMALA MEMORIAL FOUNDATION

Audits (ZA):



## Detailed results

The evaluation of the audit results basically follows the scheme shown below:

Stage	Classification	Meaning
IAC	Identified areas of concern	Areas of concern that have been identified during stage 1 audit and could be classified as a nonconformity during stage 2 audit.
CM	Comments	Special situation and information to be traced in next audit.

No.	IAC	Area / Process	Standard:clause
1	The following scope for QMS is documented. Scope : "Offering Degree college courses for Commerce, Management, Mass Media, Information technology and Computer Science meeting requirements of University of Mumbai. Offering Post Graduate courses M.Com, M.Sc. IT meeting requirements of University of Mumbai. " . Cl. 8.3 Design and Development is not applicable and due justification is documented, as the course syllabus and design is determined by University of Mumbai only. The postal address of the college site where the scope is applied to and for degree college only, need to be included in the QMS scope – relevant section of QMS manual.	Scope of QMS / QMS System coordination / M.R.	ISO 9001:2015 Clause 4.3
2	While annexure III of QMS Manual provides the sequence and interactions of processes of Admission, Planning, teaching & learning and Examination/results, the detailing of input/output/activities/measurables/controls be established for Administration / Facility management process. Also, the process effectiveness measure for Teaching and learning related to student's performance may be looked into and established properly for subsequent tracking.	QMS System coordination/ M.R.	ISO 9001:2015 Clause 4.4
3	Quality Policy dt. 18.11.2019 is released by Principal, degree college and is evident in QMS Manual. The Quality policy need to be communicated to different interested parties. The method of communicating Quality policy such as Displays, notice boards, website updation, emails , college prospectus/ publication is also required to be determined and implemented. The same may reflect in the Quality policy communication section in Quality Manual documented.	Quality Policy Communication / QMS System coordination/ M.R.	ISO 9001:2015 Clause 5.2.2
4	Risk and opportunities log is documented in DI/PLNG/RISK/01 & DI/PLNG/OPP/01 both	Risks & Opportunities Actions /	ISO 9001:2015 Clause 6.1.1

# Audit Report (Stage 1)

Organisation: NIRMALA MEMORIAL FOUNDATION

Audits (ZA):



No.	IAC	Area / Process	Standard:clause
	dt 20.01.2021. However, its linkage to any internal/external issue, any interested parties requirements or any other factor need to be established. Also , how the action planning prioritization is done in terms of risks/opportunities ratings be clarified ( H/L/M)	QMS System co-ordination/ M.R.	
5	While objectives for academic year 2019-20 are established and documented, no measurable objectives for 2020-21 are established and hence the monitoring of the same are also not evident. The monitoring/ measurement points referred to in process interactions may also be referred to, to indicate objectives at process level and monitoring of the same be initiated.	All processes/ QMS System co-ordination/ M.R.	ISO 9001:2015 Clause 6.2/9.1.1
6	While no mechanical/electrical instruments are used for monitoring/measurement, certain software used in the processes in Admission, TLP, Library, Examination process etc may be referred to in the section on monitoring and measuring resources to include the control on upgradation/ renewal of softwares with related responsibilities identified.	QMS System co-ordination/ M.R.	ISO 9001:2015 Clause 7.1.5
7.	Operations control in the processes of admission, teaching, examination etc are based on conventional processes pro COVID-19. Many changes are made in digitized working such as On-line admissions, on-line classes and examinations etc such alternate methods and necessary controls in the processes are not addressed in documentation. The same may be initiated by making alternate SOP indicating necessary controls by concerned staff and be circulated / communicated internally.	Top Management/ Communication / Operations control/ QMS System coordination/ M.R.	ISO 9001:2015 Clause 7.4 / 8.1
8	Internal audits : Frequency defined is six months. Last cycle of internal audit covered in March 2020. The coverage of internal audits thro process wise checklists and covering all relevant clauses in the process being audited, to be ensured by auditors. A suitable checklist for audits process wise may be developed. 2020-21 internal audits for core areas to be planned and conducted. The reporting of the observations by the auditors also needs improvement to reflect on the actionability and improvement areas for further analysis and review.	QMS System co-ordination/ M.R.	ISO 9001:2015 Clause 9.2

# Audit Report (Stage 1)

Organisation: NIRMALA MEMORIAL FOUNDATION

Audits (ZA):



No.	CM	Area / Process	Standard:clause
1	Internal / External issues identified in Annexure 1 – DI/CONT/E&I/01 dt 20.01.2021. The issues may be indicated with, if its a risk ( - ve) or if its an opportunity ( +ve)	QMS System co-ordination / M.R.	ISO 9001:2015 Clause 4.1
2	Needs and expectations of interested parties such as Regulatory authorities, Students & Parents, Staff etc are identified in Annexure II – DI/CONT/N&E/01 dt 20.01.2021. Interested parties such as Society/ community around, other professional bodies may be further identified and their needs and expectations be captured in the document.	QMS System co-ordination / M.R.	ISO 9001:2015 Clause 4.2
3	Various points are referred as to how organisational knowledge is managed and made accessible to employees. In this, the lessons learned from CAR, past complaints/concerns of students/parents, feedback, changes in SOPs , QMS documentation may also be included and provision of access to permanent/temporary/visiting faculties and other staff be established. ( It may be soft or hard copies. As of now access through Library documentation is mentioned )	QMS System co-ordination / M.R.	ISO 9001:2015 Clause 7.1.6
4	The efforts / deployment of continual improvement be tracked through a chronological log to reflect on the requirement of cl 10.3 ( It may be through change in SOP, circular , training , process improvement , performance improvement etc. ). This can be also used in internal training / communication.	QMS System co-ordination / M.R.	ISO 9001:2015 Clause 10.3