

Master Data of Organisation			
Name of Organisation	NIRMALA MEMORIAL FOUNDATION		
Name of corporate group (in case of multi site organization only)	-		
Street	90 FEET ROAD, ASHA NAGAR, THAKUR COMPLEX, KANDIVALI (EAST)		
Postcode / Town / Country	400101 / Mumbai / India		
Contact	Ms Vandana Singh		
E-Mail	principalnirmalacollege@gmail.com;nmfciso@gmail.com		
Phone	022-28549303		
System documentation: (Revision / Issue)	Quality Manual – Documented Information – DI Issue no. 00 dt. 18.11.2019 Rev 04 dt 22.12.2022		
Shift operation	no shift operation		
Language	English		
Peculiarities	None		
Multi Site Organisation			
Selection of sites to be audited by sampling procedure	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> n.a.
An adequate listing of all sites in the scope(s) including all valid and relevant information in each case is part of the audit file	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> n.a.	
Audit profile			
Contract ID (ZE):	Q 10639/2021		
Standards under contract / Audit type	ISO 9001 : 2015 Surveillance 2 <input type="checkbox"/> Transition audit	---	<input type="checkbox"/> Transition audit
	---	---	<input type="checkbox"/> Transition audit
Surveillance mode	Yearly surveillance		
Audit team leader	Kiran Dhavale		
E-Mail Audit team leader	dhavalek@tuv-nord.com		
Audit team	Harshal Patil		
Technical expert	N.A.		
Trainee	N.A.		
Observer	N.A.		

Audited Standards	
ISO 9001: 2015	Surveillance 2
Certificate ID (TP): QM 01 00964	Valid until: 23.04.2024
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.	
Industry / Sector (EA, TB, ...) 37.0	
Non-applicability of chapters: 8.3	
No. of considered persons: 115	No. of sites (incl. HQ): One
Lead auditor: Kiran Dhavale	Audit ID (ZA): Q 10639/2021

Definition of unit for duration and time		
Applied unit	Days	One audit day covers 8 audit hours
Audit Details		
Sites	Kandivali, Mumbai	
Audit date	17.04.2023	
Audit duration	2.00 person Days on site (incl. remote locations as applicable) inclusive 0.00 person Days on site for audit stage 1 (separate report)	

Application of methods and tools in remote auditing			
Conducted as a remote audit	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Partly	<input type="checkbox"/> Total
Technologies used for the remote audit	<input type="checkbox"/> MS Teams	<input type="checkbox"/> Cisco WebEx	<input type="checkbox"/> Zoom
	<input type="checkbox"/> Other on request of client: Not Applicable In this case, client takes over the responsibility for any required activity in information security.		

Details about the remote audit (if applicable) (Not Applicable)

The audit was performed applying technology for information and communication (“remote”) at 0 %.

Effectiveness and efficiency of the remote-part was ensured by

- experienced application of engaged technology;
- the consecutive processing of the single sessions with the individual units;
- the online interviews with different people from diverse units and various hierarchical levels;
- the separation of the audit team in individual online sessions;
- reviewing an adequate sample of documented processes and/or information;
- the discussion of appropriate charts, diagrams, slides or any other relevant information;
- the presentation and discussion of photos, videos and audios of issues, being prepared on detailed guidance and governance of the audit team.

Details about reviewed information or documents, interviewed persons, content of videos & photos etc. are recorded in the report or (handwritten) notes.

If the audit was performed partly remote, the corresponding sessions are identified unambiguously in the audit plan.

Distribution/Confidentiality/Rights of ownership/Limitations/Responsibilities

This report is sent to the certification body or bodies, the members of the audit team and the audit representative of the organisation. All documents (such as this report) regarding the certification procedure are treated confidentially by the audit team and the certification body. This audit report remains the property of the certification body.

An audit is a procedure based on the principle of random sampling and cannot cover each detail of the management system. Therefore nonconformities of weaknesses may still exist which were not expressly mentioned by the auditors in the final meeting or in the audit report.

The responsibility for continuous effective operation of the management system always rests solely with the audited and certified organisation.

Salvo clause:

The audit report will be left to the organisation at the end of the audit - subject to approval by the certification body. The independent veto process may cause modifications or additions. In these cases a modified revision will be sent to the audited organisation.

Annex/Enclosures

Annex/
corresponding audit documentation

- Questionnaire(s) / Checklist(s)
- Additional annexes, number

Audit results							
ISO 9001:2015		---		---		---	
Clause	Rslt.*	Clause	Rslt.*	Clause	Rslt.*	Clause	Rslt.*
4.1	1						
4.2	2						
4.3	1						
4.4	1						
5.1	1						
5.2	1						
5.3	2						
6.1	1						
6.2	2						
6.3	1						
7.1	1						
7.2	1						
7.3	1						
7.4	1						
7.5	2						
8.1	2						
8.2	1						
8.3	1						
8.4	1						
8.5	2						
8.6	1						
8.7	1						
9.1	2						
9.2	2						
9.3	2						
10.1	1						
10.2	1						
10.3	1						
Additional requirements in accordance to ISO 17021:2015							Rslt.*
▪ internal audits and management review							2
▪ review of actions taken on nonconformities identified in previous audit							1
▪ responsiveness to complaints							1
▪ effectiveness of the management system with regard to fulfilment of objectives							2
▪ progress of planned activities aimed at continual improvement							1
▪ the client's management system ability and its performance regarding meeting of applicable requirements							1
▪ operational control of the client's processes							1
▪ review of any changes including the management system documentation							2
▪ use of marks and/or any other reference to certification							1
Rslt.* (Result): "Empty" = not audited; 1 = fulfilled; 2 = basically fulfilled/ potential for improvement; 3 = not fulfilled/ nonconformity; - = not applicable/ excluded. Details: see section „Detailed results“							

Mandatory elements from A00VA02		
Temporary Sites		
a) Are temporary sites (i.e. installation sites, project locations etc.) available?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b) If yes: which one are visited? Not Applicable		
Objective evidences		
<p>In any regular audit the audit team shall see and review the following objective evidences. To confirm, the corresponding revision information is registered in column „Edition“ That can become applicable as well for some or all the listed objectives in special audits, e.g. for extensions or after transferring sites.</p> <p>At least in initial/recertification or extension audits (or when necessary) these objective evidences/documents are attached adequately to the audit file and uploaded into the release workflow. In any other audit it is accepted to record the revision information only.</p>		
Title/Content	Edition	Attached
Entry in professional or commercial register (or comparable evidence) - if applicable	June 2019	<input type="checkbox"/>
Organization chart/evidence of organization	22.12.2022	<input type="checkbox"/>
Company policy for audited management systems	25.02.2021	<input type="checkbox"/>
Overview of management system documentation (e.g. table of contents or presentation of the structure of the management system documentation, process map)	22.012.2022	<input type="checkbox"/>
Result of management review (e.g. cover sheet or table of contents with date and signature)	04.04.2023	<input type="checkbox"/>
Current annual planning of internal audits and evidence of audit report(s) (e.g.: cover sheet with date and signature)	22.02.2023	<input type="checkbox"/>
Standard-specific evidence, as applicable (e.g. ISO 14001: extract of environmental permit register; ISO 27001: statement of applicability, ISO 45001: accident statistics; ISO 50001: energy report as cover sheet with date and signature or evidence of continual energy performance improvement)	N.A.	<input type="checkbox"/>
Confidential information in the attached evidences may be blacked.		

Standard specific results
<input type="checkbox"/> Additional standard specific audit results and/or information are recorded in corresponding „Supplemental audit reports“ (e.g. for ISO 27001 or ISO 50001). Not Applicable

Organisations profile

COMPANIES PROFILE CONTAINING FOLLOWING INFORMATION

- INFORMATION IF MULTI-SITE SCHEME IS APPLIED : NOT APPLICABLE
- IF YES, LIST OF AUDITED SITES (E.G. IN AUDIT PROGRAM) : NOT APPLICABLE AND LIST OF CERTIFIED SITES BY THIS AUDIT AS ENCLOSURES

- NUMBER OF EMPLOYEES (NUMBER OF EFFECTIVE EMPLOYEES) INCLUDING LOANED EMPLOYEES AND SUBCONTRACTORS (FULL TIME EQUIVALENTS) AS PER EACH LOCATION : 115

Range of products/Services : Degree and Post Graduate Programs offered in Commerce (B Com / M Com) , B. Com (A&F) , BMS , BMM, BSc (IT) , BSc (CS) , MSc (IT)

Clients : All students enrolled in the college.

Nirmala Memorial Foundation College of Commerce and Science, affiliated to the University of Mumbai was established in 2003, through the vision and guidance of Mr. Thakurbhai Desai.

As an institution its purpose is to impart quality education to students of all creeds in general and the Gujarati Linguistic Minority in particular. The college strives to develop the intellectual powers of students and all concerned, continuously and consistently through methods that are participative, interactive and facilitative in a measurable manner. Also to train them to be responsible and worthy citizens by adopting change in its path.

The college offers a number of traditional and self financing under graduate and post graduate courses that are affiliated to University Of Mumbai, imparting education to about 3200 students. Management and committed Teaching and Non Teaching Staff have ensured that the college is on the right trend and have steered it in the right direction.

The strength of the college is that it is managed by academicians, who understand and respect the value of education and educationists. Infrastructure on the campus

Nirmala provides excellent infrastructure to facilitate the education process and enhance the learning ability of the students through availing amenities like:

- The eight storied building includes modern air-conditioned office blocks, well equipped airconditioned classrooms, well planned corridors and 2 elevators.
- Fully furnished library with large collection of books, periodicals and journals (both Indian & Foreign) and spacious reading rooms.
- Air-conditioned computer labs with 150 advanced machines and licensed software.
- Well organized and spacious gymkhana.
- Air-conditioned auditorium hall.
- The students' comfort common rooms for girls and boys.
- State – of- art technology in its teaching process making use of mike systems, LCD projectors.
- Hygienic and nutritious canteen facility.

The college has adopted all necessary practices to impart the education to students thro remote learnings also thro net based classes etc and provides students welfare and placement services also.

Summary of Results

- **ISO 9001 STATEMENT ON THE IMPLEMENTATION OF THE STANDARD REQUIREMENTS**
 - **STRATEGICAL DIRECTION OF THE ORGANISATION (CONTEXT, STAKEHOLDER ANALYSIS) : INTERNAL / EXTERNAL ISSUES AND STAKEHOLDERS REQUIREMENTS ARE CAPTURED IN DOCUMENTATION . NEEDS IMPROVEMENT.**

- **RISK-BASED APPROACH (ANALYSIS OF RISKS AND OPPORTUNITIES) : RISK/OPPORTUNITIES ANALYSIS IS EVIDENT THRO A RATING SYSTEM AND ACTIONS ARE ADDRESSED.**
- **CONTROL OF EXTERNALLY PROVIDED PROCESSES : A DOCUMENTED PROCESS EXISTS WHICH NEEDS IMPROVEMENT AND NECESSARY IMPLEMENTATION CONTROLS ARE EVIDENT HOWEVER FURTHER IMPROVEMENT NEEDED.**
- **SYSTEMATICAL KNOWLEDGE MANAGEMENT (ORGANISATIONAL KNOWLEDGE): LIBRARY AND PORTALPROVISION IS MADE WITH KNOWLEDGE REPOSITORY ON VARIOUS TOPICS IN ACADEMICS FIELDS SUCH AS SUBJECT READING BOOKS , STANDARDS ,ARTICLES, RESEARCH PAPERS ETC AND ACCESSIBILITY TO EMPLOYEES PROVIDED.**
- **FULFILLMENT OF COMPLIANCE // LEGAL AND OTHER OBLIGATIONS : LEGAL/STATUTORY REQUIREMENTS VERIFIED AND FULFILMENT IS EVIDENT.**
- **MEASUREMENT AND CONTINUAL IMPROVEMENT OF THE QMS PERFORMANCE : KEY PROCESSES ARE MAPPED WITH PERFORMANCE MEASURE AND PERIODIC TRACKING WITH ASSIGNED RESPONSIBILITIES. IMPROVEMENT POTETIAL IN THIS EXISTS WHICH IS DISCUSSED AND IDENTIFIED IN DETAIL.**

☒ This audit was performed for Surveillance purpose in accordance to ISO 9001:2015. The requirements (e. g.: context of an organization, understanding the needs and expectations of interested parties, actions to address risks and opportunities, management of change, contractors, outsourcing , Operations control , Internal Audit , Management Reviews and improvements) were assessed in this audit.

The Surveillance audit was performed on 17th April 2023 for Kandivali, Mumbai facility on site.

The audit findings are summarised as : 2 no GP, 6 nos – PI ,2 – CM, Nil - NC B and Nil - NC A.

There is no change to the scope of Quality Management System (QMS) as per ISO 9001:2015, from the last surveillance audit. All requirements of ISO 9001:2015 are applied, except Clause 8.3 Design and Development of Products and Services. Due justification is provided in the QMS Manual DI Rev 04 dt 22.12.2022 as syllabus of all courses conducted by college is provided by University of Mumbai and college has no role to play in course design. There are no major customer complaints and all complaints are addressed for its closure.

Certification audit was performed to verify the adherence of the Quality Management System in accordance with ISO 9001: 2015, as per the schedule. No Non conformances were observed in audit, however, there are improvement opportunities identified. The audit findings have been conveyed to concerned auditees, M.R./D.R. & company top management during audit & closing meeting held at the end of this audit. Based on the findings, it is ascertained that the documented system, Process & the practices were at overall level meeting the requirements of ISO 9001: 2015 standard.

Based on audit findings , the audit **team recommends** the **maintenance of the certificate** as per ISO 9001:2015.

Conclusion

Taking into account the size and structure of the organisation, the objectives, the scope of the management system, the processes and the outcome, the organisation has demonstrated, that it operates its management system in order to ensure fulfilment of its own requirements, the requirements of its customers and the relevant legal requirements as well as the applicable requirements of the management system standards.

This includes in particular:the objective evidences already mentioned,

- the policies and objectives and their implementation in the organisation,
- the processes existing in the management system and their interactions,
- the resource management,
- the measuring and analysis (incl. sample of indicators),
- the continual improvement process as well as
- the recording system (p.r.n. including standard specific objective evidences).

The implementation and the effectiveness of the management system and the processes for providing services/product realisation or to realize the objectives were assessed by the audit team by means of on-site inspection and examination of documents on a random sample basis.

Nonconformities are recorded in corresponding reports, other findings (as e.g. opportunities for improvement) are described in the section for "Detailed Results"

Notes for the detailed results

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

Stage	Classification	Meaning
NC A	Major Nonconformity (Nonconformity A "major")	Nonconformities could be classified as major in the following circumstances: <ul style="list-style-type: none"> • if there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements, • a number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.
NC B	Minor Nonconformity (Nonconformity B "minor")	Nonconformities could be classified as minor, if these do not affect the capability of the management system to achieve the intended results.
OFI	Opportunity for improvement	Items which would allow optimisation of the management system in relation to the requirements of the relevant standard. It is recommended that the company implements these items.
GP	Positive aspects / Good Practice	Positive aspects of the management system worthy of special mention (see also point 4.3 if applicable).
CM	Comments	Special situation and information to be traced in next audit.

Detailed results			
If applicable: Guidance for management of nonconformities			
<p>The organization shall perform a root cause analysis for any nonconformity and define adequate corrective actions. Root cause analysis, corrective actions including action plan for implementation and - if applicable- objective evidences for performed corrections or containment actions shall be submitted electronically to nominated lead auditor in charge on time to agreed deadline (latest six weeks after last day of the audit). The lead auditor will review these documents and shall inform organisation about the result.</p> <p>The auditee organisation shall implement the corrective actions as defined in the approved action plan and review the effectiveness of implemented actions.</p> <p>In the case of major nonconformities (NC A) the lead auditor shall verify the complete and effective implementation of action plan until agreed date (latest three months after last day of the audit). On decision of the auditor depending on type and extent of identified nonconformity, this can be done in a follow up audit on site or in a desktop-review of submitted documentation (objective evidence).</p> <p>For minor nonconformities (NC B) it can be agreed to perform the verification of effective implementation of action plan in the next regular audit.</p> <p>If any nonconformity applies for more than one audited standard, it shall be counted for every applicable standard; therefore the total number of nonconformity reports can be less than the number of nonconformities.</p>			
Summary for nonconformities			
Any identified nonconformity is recorded in an individual NC report.			
Standard	Raised in this audit		To be verified from previous audit
	Number NC A	Number NC B	Number NC
ISO 9001:2015	0	0	3
Total	0	0	3
Total number of nonconformity-reports raised in this audit:			0
<input type="checkbox"/> At least one of the nonconformities is graded as „generic“ and is counted in more than one corresponding audited standard.			
<input checked="" type="checkbox"/> During this audit the implementation of corrective actions and effectiveness of nonconformities of previous audit was verified. The records are attached to this audit file.			


No	OFI (Opportunity for Improvement)	Area / Process	Standard: clause
1.	The overall documented information of Quality Manual, procedures and formats is maintained ; however the documents amendments , numbering and maintaining master list and master documents for reference may be improved.	System Coordinator / DR/ M.R.	ISO 9001:2015 CI 7.5.2/7.5.3
2.	Various interested parties and their needs and expectations are captured in Annexure II – DI/CONT/N&E/04; however vendors/service providers may be added as a category of interested party and their requirements be captured in Annexure II.	System Coordinator / DR/ M.R.	ISO 9001:2015 CI 4.2
3.	Oraganogram in DI 02 is updated with D.R. position; however this positions' responsibilities and authorities may be further addressed similar to those of other positions.	Top Management	ISO 9001:2015 CI 5.3
4.	While internal audits are periodically conducted and audit reports generated; however the recording of corrective actions by auditees and verification of corrective actions through capturing and recording of specific evidences by auditors may further be improved. Also, similar to tracking of NC actions, actions for OFIs may also be compiled/ tracked and reviewed in subsequent management reviews.	Internal Audit.	ISO 9001:2015 CI 9.2
5.	The critical assets in infrastructure are maintained through various AMCs such as that for elevators. Further, mechanism of tracking of due date for AMC and ensuring its timely completion may further be improved.	Administration / Maintenance	ISO 9001:2015 CI 8.1
6.	Multiple fire extinguishers are used in various floors in the institute and refilled / checked by third party. A clear identification on various assets may be provided to trace the valid date for checking and its relevant records.	Administration / Maintenance	ISO 9001:2015 CI 8.5.2

No	GP (Good Practice)	Area / Process	Standard: clause
1.	Good infrastructure for classrooms with AV facilities, Computer / IT and other laboratories , well equipped Library with books/journals and internet facilities, student's and staff facilities such as Gymkhana, canteen, Wellness centre ; usage of multiple remote teaching tools etc.and competent teaching/non teaching staff including visiting/empanelled faculties in various course offered. Top management commitment is visible towards system improvement and overall growth/ progress of the institution.	Management Commitment / Infrastructure/ competent staff	ISO 9001:2015 CI 5.1 / 7.1
2.	Improvements in operational areas , such as all classrooms airconditioned, extension of various modes of fees payments to parents/students , increase in no of PhD programs as compared to previous year.	Top Management	ISO 9001:2015 CI 10.3

No	CM (Comment)	Area / Process	Standard: clause
1.	While organisational objectives are set up and monitored periodically, the functional level objective setting especially at Teaching and Learning process and Examination process for various programs and its periodic monitoring and measurement tracking needs improvement.	Teaching and Learning process all programs / Examination Process	ISO 9001:2015 CI 6.2/9.1.1
2.	The management reviews are conducted once in six months as per set agenda; however the review of previous management review open points and recording of decisions & actions to be taken with respect to each point discussed in review meeting may be improved.	Top Management / DR	ISO 9001:2015 CI 9.3

Recommendations				
Results	ISO 9001:2015	---	---	---
Fulfilled	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open nonconformities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not fulfilled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendations	ISO 9001:2015	---	---	---
Grant*/ Extension*/ Renewing*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintenance*	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suspension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Withdrawal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>*) Grant / Extension / Renewing / Maintenance in the case of open nonconformities assumes that the nonconformities will be cleared as agreed</p> <p>Explanation of the terms:</p> <p>Renewing: New issue of the certificate for the re-certification.</p> <p>Restoring: End of the temporary invalidity of certificate after the suspension or after delayed re-certification.</p>				

Comments for next audit
<p>If applicable, the final evidence of effectiveness and implementation of corrections and corrective actions for the nonconformities from this audit will be verified in the next audit.</p> <p>The comments and opportunities for improvement will be taken up again.</p> <p>The next audit is preliminarily scheduled for: 23.03.2023</p>

Responsible for content	
Name: Kiran Dhavale	Date: 17.04.2023
 Signature audit team leader	