Audit Report (Surv.1) ----

Organisation	**Malad Kandivli Education Society's Nagindas Khandwala College Of Commerce, Arts & Managements Studies And Shantaben Nagindas Khandwala College Of Science / The Bombay Suburban Grain Dealers' Junior College Of Commerce, Arts & Science**
Audits (ZA):	**4821/2010**

TÜV NORD Certification

Master Data of Organisation

Name of Organisation	Malad Kandivli Education Society's Nagindas Khandwala College of Commerce, Arts & Management Studies and Shantaben Nagindas Khandwala College of Science and The Bombay Suburban Grain Dealers' Junior College of Commerce, Arts and Science
Name of corporate group (in case of group certification)	
Street	Bhadran Nagar, Road No.1, S.V.Road, Malad West, Mumbai - 400 064
Postcode / Town / Country	400064 Mumbai / Maharashtra
Contact	Dr. (Mrs) Moushumi Datta – Professor & MR
E-Mail	<moushumi@nkc.ac.in>
Phone/Fax	022 28072262 , 022 022 28072262 , 022 28085424
Language	English
Scope Description	Design and Development of Curriculum and Imparting Education to Under Graduate students in the Faculty of Commerce, Arts, IT and Computer Science and Post Graduate students of Commerce, Arts and IT, affiliated to the University of Mumbai. Imparting Education to Higher Secondary Students of Maharashtra State Board – Mumbai Division in the Commerce and Arts stream
	more description regarding scope in annex
Industry / Scope (EA, TA, ...)	37.0, 37.1

Audit profile

Standards under contract / Audit type	ISO 9001 : 2015 1.Surveillance audit	: ---
☐ Wechsel auf ISO 45001:2018	: ---	: ---
System documentation: Revision / Issue	Doc. Info. Issue 01, 15.01.18	
Surveillance mode	Yearly surveillance	
Audit team leader / responsible	V.G.Patil	
Audit team	Yatin Bhosale	
Technical expert		
Trainee		
Multisite-organisation	All sites are listed in: ☐ Audit Reference Data Sheet ☐ separate Listing ☐ Audit program/ATEA ☐ Multisite-certification (Sample)	
Shift operation	no shift operation	

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Audits (ZA):	**4821/2010**

Audited Standards

ISO 9001 **:** 2015	**QMS**
Non-applicability of chapters: 7.1.5	
Audit team leader: V.G.Patil	Audit number(ZA): 4821/2018
Certificate number: 44 100 19392213 & 44 100 19392213/01	Valid until: 30.01.2022
:	
Non-applicability of chapters:	
Audit team leader:	Audit number(ZA):
Certificate number:	Valid until:
:	
Non-applicability of chapters:	
Audit team leader:	Audit number(ZA):
Certificate number:	Valid until:
:	
Non-applicability of chapters:	
Audit team leader:	Audit number(ZA):
Certificate number:	Valid until:

Audit-Details

Sites	01
Audit date	18.11.19 – 19.11.19
Audit duration	3.00 person days on site including 0,00 person days for stage 1 audit (separate report)

Details for Stage 1 – Audit

Stage 1 - Audit	not necessary.		
Duration Stage 1 - Audit	:	0,00	person-day (s)
	:	0,00	person-day (s)
	:	0,00	person-day (s)
	:	0,00	person-day (s)
		0,00	total
Date Stage 1 - Audit	-		

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Organisation	**Malad Kandivli Education Society's Nagindas Khandwala College Of Commerce, Arts & Managements Studies And Shantaben Nagindas Khandwala College Of Science / The Bombay Suburban Grain Dealers' Junior College Of Commerce, Arts & Science**
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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 release 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	☐ Questionaire(s) / Checklist(s) ☐ Additional annexes, number

Audit Report (Surv.1) ----

Organisation	**Malad Kandivli Education Society's Nagindas Khandwala College Of Commerce, Arts & Managements Studies And Shantaben Nagindas Khandwala College Of Science / The Bombay Suburban Grain Dealers' Junior College Of Commerce, Arts & Science**
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Summary of results

ISO 9001:2015			--			--			--		
Clause	Audited	Result*	Clause	Audited	Result*	Clause	Audited	Result*	Clause	Audited	Result*
4.1	☒	1		☐			☐			☐	
4.2	☒	1		☐			☐			☐	
4.3	☒	1		☐			☐			☐	
4.4	☒	1		☐			☐			☐	
5.1	☒	1		☐			☐			☐	
5.2	☒	1		☐			☐			☐	
5.3	☒	1		☐			☐			☐	
6.1	☒	2		☐			☐			☐	
6.2	☒	1		☐			☐			☐	
6.3	☒	1		☐			☐			☐	
7.1	☒	1		☐			☐			☐	
7.2	☒	2		☐			☐			☐	
7.3	☒	1		☐			☐			☐	
7.4	☒	1		☐			☐			☐	
7.5	☒	1		☐			☐			☐	
8.1	☒	1		☐			☐			☐	
8.2	☒	1		☐			☐			☐	
8.3	☒	1		☐			☐			☐	
8.4	☒	2		☐			☐			☐	
8.5	☒	2		☐			☐			☐	
8.6	☒	1		☐			☐			☐	
8.7	☒	1		☐			☐			☐	
9.1	☒	2		☐			☐			☐	
9.2	☒	1		☐			☐			☐	
9.3	☒	1		☐			☐			☐	
10.1	☒	1		☐			☐			☐	
10.2	☒	1		☐			☐			☐	
10.3	☒	1		☐			☐			☐	
	☐			☐			☐			☐	
	☐			☐			☐			☐	

Additional requirements in accordance to ISO 17021:2015	Audited	Result
a) internal audits and management review	☒	1
b) review of actions taken on nonconformities identified in previous audit	☒	NA
c) responsiveness to complaints	☒	1
d) effectiveness of the management system with regard to fulfilment of objectives	☒	1
e) progress of planned activities aimed at continual improvement	☒	1
f) the client's management system ability and its performance regarding meeting of applicable requirements	☒	1
g) operational control of the client's processes	☒	1
h) review of any changes including system documentation	☐	1
i) use of marks and/or any other reference to certification	☐	1

audited: ☒ = audited sections of the standard;

Result: **1** = fulfilled; **2** = basically fulfilled / potential for improvement; **3** = not fulfilled / nonconformity ; **-** = not applicable / excluded.
Details are listed in the section "Detailed results". Fields with a coloured background are obligatory elements in **every** audit.

Obligatory elements from A00VA02

a) Are temporary sites (i.e installation sites, project locations etc.) available?	yes ☐	no ☒
b) Which one are visited?	NA	

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Organisations profile

The organization is involved in providing education to students in the degree and post graduate degree courses in the faculty of arts, commerce, B.Sc (IT) and Computer Science and for higher socondary education in the faculty of arts and commerce.

The institution is headed by Mrs Dr. Ancy Jose, Principal, and Dr. Moushumi Datta, Professor (Geography) is nominated as the Senior D.R. (Designated Representative) for the quality management system. The organization employs about 100 personnel for their operations.

The core business processes include admissions, teaching & learning & examinations & support processes such as library, gymkhana, IT Support, infrastructure & maintenance etc.

Education facility consists of classrooms with audio visual projection systems, computer laboraties, language laboratory, library, conference rooms, auditoriums, teaching staff rooms, gymkhana,

The major customers to the organization are e.g. Students aspiring for learning and gaining knowledge .

Summary / explanations of results

☐ This surveillance audit was performed in accordance to ISO 9001:2015. This time, the audit covered implementation of requirements of clause 8.3 due to the autonomous status granted to this college. Other requirements (e. g.: context of an organization, understanding the needs and expectations of interested parties, risks and opportunities, actions to address risks and opportunities, management of change, contractors, outsourcing) were assessed in this audit & found to be satisfactory. **Hence continuation of existing certificate is recommended.**

- **Legal form of the Organsisation**

    ☒ The organisation audited comprises of one or more legal entities, authorities, institutions or a combination of the same (Ltd., etc.).

    ☐ The organisation audited comprises of a part of a company (e.g. site certification).

    ☐ Current registry entries (≤ 12 months) are available or have been reviewed.

    ☐ The organisation audited is not listed in an official register (e.g. person or group of persons).

    ☐ The organisation audited can be described as follows:

Audit Report (Surv.1) ----

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Conclusion

Taking into account the size and structure of the organisation, the products/services supplied and the process used, the organisation has basically 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.

This includes in particular:

- The policies from 30.07.16, objectives and their implementation in the organisation
- The processes which exist in the management system and their interaction
- The management system documentation
- The recording system
- The resource management
- The measuring and analysis (management review from 14.09.19, audit planning from 18.08.19, audit report(s) from 26.08.19 and examples for indicators)
- The continual improvement process

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

Nonconformities, observations and the potential for improvement are described in the "Detailed Results" section.

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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)	Nonconformities could be classified as major in the following circumstances: • 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)	Nonconformities could be classified as minor, if these do not affect the capability of the management system to achieve the intended results.
PI	Potential 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.

Follow-up action(*):

NC A: Action plan with follow-up Audit or action plan and submission of documents.

NC B: Action plan and if necessary submission of documents.

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Detailed results

No.	Major Noncorformity (Nonconformity A)	Area / Process	Standard:clause	Set date
-	-	-	-	-

No.	Minor Noncorformity (Nonconformity B)	Area / Process	Standard:clause	Set date
-		-	-	-

No.	PI	Area / Process	Standard:clause
1	Acquisition policy & vendor evaluation process is evident, evaluation records are verified; However, vendor selection process may further strengthened by adding specific criteria	Library	ISO 9001:2015 Clause 8.4.3
2	Quality objective for training is evident, training records are verified; duration of the session may mentioned on records for monitoring of objective	Library	ISO 9001:2015 Clause 7.2
3	Process of purchase requisition is evident, verified the purchase records; However, Expected delivery date may mentioned on the requisition as input for procurement team	Library	ISO 9001:2015 Clause 8.5.1
4	The institute is monitoring the process perfomance against the indicators defined. However, systematic compilation of data for reference at aglance & evaluation of the same may be further improved e.g. Annual Academic Calendar.	Teaching & Learning	ISO 9001:2015, Clause 9.1.1
5	Risk assessment has been done alongwith actions to address the same. However, it may be may be reviewed & can be further clarified at individual process/level.	Risk Assessment	ISO 9001:2015, Clause 6.1

No.	GP	Area / Process	Standard:clause
1	Good infrastructure facilities for students education such as AC class rooms , projector facilities in class , Well equipped library and good teaching aids used such as PPT presentations / screens in class room etc . Facilities for extra curricular activities encouraged for students .	Top Management / Infrastucture	ISO 9001:2015 , 7.1
2	Top Management commitment for improvements in students development and performance , education facilities and driving support thro faculty members.	Top Management/ Customer Focus	ISO 9001:2015 , 5.1

No.	CM	Area / Process	Standard:clause
-	-	-	-

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Management of non-conformities

☒ Nonconformities were not found - the procedure can continue.

☐ Nonconformities were found.

Follow-up action:

NC A: Action plan with follow-up Audit or action plan and the submission of documents

☐ **Action plan and follow-up audit**
 A scheduled plan of actions with the serial number of the findings, root cause analysis, corrections (to eliminate the non-conformity) and corrective actions (to eliminate the cause of the non-conformity) have to be submitted to the auditors for reviewing (Deadline: Within 6 weeks after the last audit day). Based upon the action plan the on-site review and evaluation of the introduction, implementation and effectiveness of implemented guided corrections and corrective actions take place (Deadline: Within 3 months after the last audit day).

or

☐ **Action plan and the submission of documents**
 A scheduled plan of actions with the serial number of the findings, root cause analysis, corrections (to eliminate the non-conformity) and corrective actions (to eliminate the cause of the non-conformity) have to be submitted to the auditors for reviewing (Deadline: Within 6 weeks after the last audit day).Based upon the action plan the evaluation of the effectiveness and the implementation of corrections and corrective actions take place (Deadline: Within 3 months after the last audit day).

NC B: Action plan and if necessary the submission of documents

☐ **Action plan**
A scheduled plan of actions with the serial number of the findings, root cause analysis, corrections (to eliminate the non-conformity) and corrective actions (to eliminate the cause of the non-conformity) have to be submitted to the auditors for reviewing (Deadline: Within 6 weeks after the last audit day).

☐ **Submission of documents** (if necessary)
Based upon the action plan the on-site review and evaluation of the introduction, implementation and effectiveness of implemented guided corrections and corrective actions take place (Deadline: Within 3 months after the last audit day).

Note: The audit team leader directs the non-conformities as needed to the responsible auditor for processing.

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Results				
Results	**ISO 9001:2015**	**--**	**--**	**--**
Fulfilled	☒	☐	☐	☐
Open nonconformities	☐	☐	☐	☐
Not fulfilled	☐	☐	☐	☐
Follow up actions				
None	☒	☐	☐	☐
Action plan	☐	☐	☐	☐
Document review	☐	☐	☐	☐
Follow up audit	☐	☐	☐	☐
Next audit	☐	☐	☐	☐
Recommendations				
Grant/Extension*/Renewing*	☐	☐	☐	☐
Maintenance*	☒	☐	☐	☐
Suspension	☐	☐	☐	☐
Restoring	☐	☐	☐	☐
Refusing	☐	☐	☐	☐
Withdrawal	☐	☐	☐	☐
	☐	☐	☐	☐

*) Grant / Extension / Renewing / Maintenance in the case of open nonconformities assumes that the nonconformities will be cleared as agreed.

Explanation of the terms:

Renewing: New issue of the certificate for the re-certification.

Restoring: End of the temporary invalidity of certificate after the suspension or after delayed re-certification.

Comments for next audit

In the next audit, the final evidence of effectiveness, corrections and corrective actions will be assessed for the possible nonconformities from this audit.

The comments and potentials for improvement will be taken up again.

For the next audit it is preliminarily agreed: Date 03.12.2020

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Audits (ZA): **4821/2010**

Signatures	
Date: 19.11.2019 Name: V.G.Patil	Signature Audit team leader
Date: 19.11.2019 Name: Dr. Moushumi Datta	Signature Representative of organisation