

Surveillance 1#-

Report issued at 12:40 GMT on 22-Nov-2023





| Client ID#: CMPY-189257     |   |  |
|-----------------------------|---|--|
| Client/Address:             | Mula Education Society's Arts Commerce and Science College                    |  |
|                             | A/P- Sonai - Rahuri Road, Sonai, Taluka, Newasa,                              |  |
|                             | Dist Ahmednagar - 414105, Maharashtra, India                                  |  |
| Audit Criteria:             | ISO 14001:2015, ISO 9001:2015   |  |
| Audit Activity:             | Surveillance 1#-  |  |
| Date(s) of Audit:           | Dist Ahmednagar, India:   |  |
|                             | 28-Aug-2023 to 29-Aug-2023  |  |
| Auditor(s) (level):         | Anil Kadam (Lead Auditor, Lead Auditor, Dist Ahmednagar, India)               |  |
| Scope of Audit and Scope of | Site: Mula Education Society's Arts Commerce and Science College, Dist        |  |
|                             | Ahmednagar, Maharashtra, India  |  |
| Certification:              | ISO 14001:2015:   |  |
|                             | Provision of Higher Secondary Education, Bachelor's Degree, Diploma, Graduate |  |
|                             | and Undergraduate programs in Arts, Commerce and Science Streams.             |  |
|                             | ISO 9001:2015:  |  |
|                             | TO Provide Education to UG & PG Students Under Faculty of ART, Commerce and   |  |
|                             | Science.  |  |

## **OVERALL RESULT:**

Action Required

The management system was found to be effectively implemented although minor nonconformities were cited.

### **EXECUTIVE SUMMARY**

Top Management ensures customer requirements are determined and are met with the aim of enhancing customer satisfaction, institute has demonstrated leadership and commitment with respect to the quality and environment management system by assigning the accountability to Principal and Coordinators.



# **SWOT ANALYSIS**

|               | 1. Strong technology backup  |
|---------------|--|
| Strengths     | 2. Young and motivated team  |
|               | 3. Controlled Educational Aids.  |
|               | 4. Quick decision making   |
|               | 5. Strong student focus  |
|               | 6. Long term student professor relationship                                  |
|               | 7. Strong will of professors for higher education                            |
|               | 8. Strength commitment with the management to prevent environment pollution. |
|               | 9. Comply with all applicable legal requirements.                            |
|               | 1. Limited technical team having domain knowledge on EMS-NCs reported.       |
|               | 2. Lack of variety of expertise  |
| Weaknesses    | 3. Understanding significance of standard despite green initiatives.         |
| weaknesses    | 4. Inventory control from legal requirements.                                |
|               | 5. Necessary increased awareness and requirement of environmental and        |
|               | environmental issues.  |
|               | 1. To develop EMS Skills   |
|               | 2. Multi skilling and higher education for down trodden in rural area.       |
| Onnortunition | 3. Low level of competition  |
| Opportunities | 4. High growth potential   |
|               | 5. Academic students from different parts of India.                          |
|               | 6. Compliance with environmental and environmental related norms             |
| Threate       | 1. Depletion of natural resources  |
| Threats       | 2. Increasing pollution from the activity.                                   |

# **INTERTEK MATURITY MODEL**

The score descriptions are generic to all management systems and cannot be customized by the auditor, thus allowing for the consistency of interpretation and standardization of audit results worldwide. The scores provided to your organisation are for benchmarking purposes only and are based on the audit team's evaluation.

#### Management

Evidence of management commitment, customer and/or interested party satisfaction, knowledge/awareness of policy and objectives does exist. Responsibility and authority is documented, understood and supported via data, trends and related KPI's. Management reviews are complete and meet the minimum intent.

#### **Internal Audits**

Internal audits are being performed at planned intervals and are based on status and importance of the Management System. Data is being collected on regular basis. Audit teams are trained, impartial and objective in their approach. Audit reports are clear, concise with respect to content. Actions are being taken as a result of audit findings and timely responses are provided.

#### **Corrective Action**

The corrective action process meets the minimum requirements as defined by the standard. Data does exist from such sources such as customer and/or interested party complaints, internal audits, warranty analysis, defects, internal metrics and supplier performance. The process includes a review of the effectiveness of the actions taken. There is evidence of problem solving tools being used to support the process.

#### **Continuous Improvement**

Data streams are being used as sources to drive continual improvement over time. These may include management system policy, objectives, and audit results, analysis of data, CAPA and management reviews.

#### **Operational Control**

Operational Controls are planned and developed. Planning is consistent with many of the other Management processes. Objectives, process requirements, needs for appropriate additional documents and resources, verification and monitoring activities and records requirements have been determined, as appropriate. Processes and activities run consistently. Some data is collected to verify the adequacy of operational controls with evidence of some improvement trends.

#### Resources

Resources required for the effective maintenance and improvement of the management system have been defined and deployed. Customer and/or interested party satisfaction and overall stability of the management system has been demonstrated. Competency requirements have been defined and implemented.

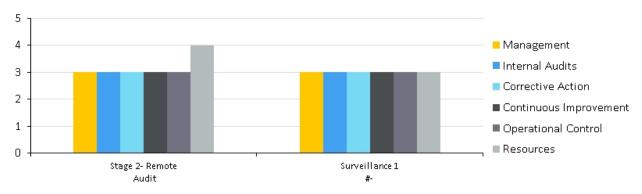
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#### Intertek Maturity Model

Rating: 5=Benchmark | 4=Mature | 3=Meets Intent | 2=Beginning | 1=Not Evident

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# **FINDING SUMMARY**

|  | Minor | Major |
|--|-------|-------|
| Issued during current activity                     | 4     | 0     |
| Opportunities for improvement have been identified |       |       |

Opportunities for improvement have been identified No

# **STATUS OF PREVIOUS AUDIT FINDINGS**

#### Follow-up on findings issued at previous audit:

Prior assessment resulted in no non conformities.



# **FINDING DETAIL**

| Finding #:          | Audit Criteria: | <b>Corrective Action</b> | <b>Corrective Action</b>      |
|---------------------|-----------------|--------------------------|-------------------------------|
|                     |                 | Plan Due Date:           | Implementation Date:          |
| Finding 1437712 - 1 | ISO 14001:2015  | 08-Sep-2023              | 08-Sep-2023                   |
| Issued by:          | Classification: | Document Ref#:           | Action Required:              |
| Anil Kadam          | Minor           | NA                       | Submit corrective action plan |

#### Finding:

Process of evaluation of compliance is not effectively implemented.

#### **Requirement:**

#### 9.1.2

The organization shall retain documented information as evidence of the compliance evaluation result(s).

#### 9.1.2a

The organization shall determine the frequency that compliance will be evaluated.

#### 9.1.2b

The organization shall evaluate compliance and take action if needed.

#### 9.1.2c

The organization shall maintain knowledge and understanding of its compliance status.

#### **Objective Evidence:**

- 1. Stack emission level monitoring for DG set is not done.
- 2. Fuming Hood & Chemistry Lab air quality monitoring is not done.
- 3. Noise monitoring near DG area is not done.



| Finding #:          | Audit Criteria: | <b>Corrective Action</b> | Corrective Action             |
|---------------------|-----------------|--------------------------|-------------------------------|
|                     |                 | Plan Due Date:           | Implementation Date:          |
| Finding 1437712 - 2 | ISO 14001:2015  | 08-Sep-2023              | 08-Sep-2023                   |
| Issued by:          | Classification: | Document Ref#:           | Action Required:              |
| Anil Kadam          | Minor           | NA                       | Submit corrective action plan |

#### Finding:

Process of establishing & implementation operational control is not effective.

#### **Requirement:**

Others: 8.1. Operational planning and control.

The organisation shall establish, implement, control and maintain the processes needed to meet environmental management system requirements, and to implement the actions identified in 6.1 and 6.2, by:

- Establishing operating criteria for the process(es).
- Implementing control of the process(es), in accordance with the operating criteria.

Note Controls can include engineering controls and procedures. Controls can be implemented following a hierarchy (e.g. elimination, substitution, administrative) and can be used individually or in combination.

The organization shall control planned changes and review the consequences of unintended changes, taking action to mitigate any adverse effects, as necessary.

The organisation shall ensure that outsourced processes are controlled or influenced. The type and extent of control or influence to be applied to the process(es) shall be defined within the environmental management system. Consistent with a life cycle perspective, the organization shall:

a) Establish controls, as appropriate, to ensure that its environmental requirement(s) is (are) addressed in the design and development process for the product or service, considering each life cycle stage;

b) Determine its environmental requirement(s) for the procurement of product and services, as appropriate;

c) Communicate its relevant environmental requirement(s) to external providers, including contractors;

d) Consider the need to provide information about potential significant environmental impacts associated with the transportation or delivery, use end -of-life treatment and final disposal of its products and services.

The organisation shall maintain documented information to the extent necessary to have confidence that the processes have been carried out as planned.

#### **Objective Evidence:**

Operational control is not effective in following areas.

- 1. Hazardous waste found mix with nonhazardous waste near Vidnyan Bhavan
- 2. Hazardous chemical spilled in sand tray; disposal of sand method is not adequate.



| Finding #:          | Audit Criteria: | <b>Corrective Action</b> | Corrective Action             |
|---------------------|-----------------|--------------------------|-------------------------------|
|                     |                 | Plan Due Date:           | Implementation Date:          |
| Finding 1437712 - 3 | ISO 9001:2015   | 08-Sep-2023              | 08-Sep-2023                   |
| Issued by:          | Classification: | Document Ref#:           | Action Required:              |
| Anil Kadam          | Minor           | NA                       | Submit corrective action plan |

#### Finding:

Process of conducting lectures and updating Teaching plan and implementation record is not fully effective in sampled case.

#### **Requirement:**

8.5.1

The organization shall implement production and service provision under controlled conditions.

Others: 8.5.1. Control of production and service provision.

The organization shall implement production and service provision under controlled conditions.

Controlled conditions shall include, as applicable:

a) the availability of documented information that defines:

1) the characteristics of the products to be produced, the services to be provided, or the activities to be performed;

2) the results to be achieved;

b) the availability and use of suitable monitoring and measuring resources;

c) the implementation of monitoring and measurement activities at appropriate stages to verify that

criteria for control of processes or outputs, and acceptance criteria for products and services,

have been met;

d) the use of suitable infrastructure and environment for the operation of processes;

e) the appointment of competent persons, including any required qualification;

f) the validation, and periodic revalidation, of the ability to achieve planned results of the processes

for production and service provision, where the resulting output cannot be verified by subsequent monitoring or measurement;

g) the implementation of actions to prevent human error;

h) the implementation of release, delivery and post-delivery activities.

#### **Objective Evidence:**

As per CBCS-2019 Pattern of Savitribai Phule Pune University Page No. 35, MSC II Organic chemistry Course code-CHO-353-A, Total 48 Lectures to be conducted, however only 42 lectures are conducted, no evidence of 6 lectures are conducted.



| Finding #:          | Audit Criteria: | <b>Corrective Action</b> | Corrective Action             |
|---------------------|-----------------|--------------------------|-------------------------------|
|                     |                 | Plan Due Date:           | Implementation Date:          |
| Finding 1437712 - 4 | ISO 9001:2015   | 08-Sep-2023              | 08-Sep-2023                   |
| Issued by:          | Classification: | Document Ref#:           | Action Required:              |
| Anil Kadam          | Minor           | NA                       | Submit corrective action plan |

#### Finding:

Calibration of product / process measuring equipment is not evident.

#### **Requirement:**

#### 7.1.5.1

The organization shall determine and provide the resources needed to ensure valid and reliable results when monitoring or measuring is used to verify the conformity of products and services to requirements.

#### **Objective Evidence:**

Autoclave – DSK No.-23, Hot Air Oven serial number. 16635417, Digital temp serial number 17K071004213, calibration is not evident.



# **EVIDENCE SUMMARY**

The state of the management system is summarized below:

#### Conclusion of Client's Processes/Functional areas audited including KPI/Metrics

Site Tour : Adequate facilities those including lectures and lab equipment, service and process monitoring and measuring equipment's are provided, the standard of housekeeping within the respective offices and surrounding environment was found adequate as according to the nature of services the college is into. Classrooms, Labs, Library, and office area is maintained neat clean and state of order. College has green environment campus maintained. College gives emphasis on sports and physical activities in addition to classroom teaching.

#### Top Management : Dr. Shankar Laware.

Interviewed Principal and HoD of departments, found customer focused commitment towards QEMS implementation observed positively, strategic decisions towards QEMS implementation found committed, objectives are reviewed, and actions are initiated which objective is not performed.

#### Management System : Dr. H K Sadekar.

System documentation has been reviewed found complained, no revisions, management system is in line with the college objectives and supports their attainment, measurable objectives have been defined across all functions, tracked periodically and reviewed during management review. Internal audits are conducted as per established frequency once in a six-month covering all departments and elements of the standards, internal audit records verified last audit conducted on 15th & 16th Feb-2023, one nonconformity raised in internal audit and closed out effectively. Management review is conducted once in a six-month last review conducted on 29-02-2023, review conducted as per standard agenda. Overall management system found effective.

Usage of Intertek Logo - No mis use of logo found, verified letter head, business cards, where Intertek logo is not printed.

Operational Control : Planning for Aspect Impact and risk assessment as applicable to the scope were reviewed from time to time and the current status with required controls and applicable legal requirements were available and followed, process and sub process defined, monitoring of aspect defined department wise aspect impact and risk register. Aspect Impact risk register assessment procedure established, criteria for analysis defined well, function wise activities analyzed. Process wise aspect impact prepared and for monitoring procedure documented. Life cycle perspective taking into consideration chemicals used in lab scale not crossing the threshold criteria responsible for environmental framework, its external service providers, solid waste, compliance needed if any for its medical waste resulting into environmental pollution and impact from life cycle analysis perspective for end of service period, these also apply to external outsource processes. MES's ACS has also considered that some of significant impacts can occur during Transporation, delivery use end of life treatment or disposal of lab products.



Academic : Process consist of assigning the work of planning to responsible faculty and communication to concern faculty, college level activities are determined in academic session, finalizing activities in academic session department wise event calendar is finalized considering departmental activities over and above institute activities and any innovative concepts. academic calendar is finalized before commencement of academic year consisting of, holiday schedule, curricular activities such as lectures, practical, seminars and projects, industrial visits, bank visits, cocurricular activities such as NSS, NCC, paper presentations, guest lectures, debate, technical discussions, group discussions and quiz, extracurricular activities like annual social gathering, sports, examination schedule, various meeting, conclusion teaching, total number of working days in academic year is mentioned, according class room, laboratory time table is prepared, while preparing timetable ensuring no overlapping of faculties classrooms and laboratories, timetable is displayed on notice boards. preparing teaching plan and practical plan month wise, verification of syllabus completion status is done by head of department on midterm basis. sampled and verified PG Semester III MSC II organic chemistry course code CBOP-3, 48 hours lectures, 12 hours tutorial, and UG Commerce second year course code 246(B). Banking and Finance semester III & IV, total credits 4, Theory-3, Pratical-1, one lecture of 50 mins, total lectures-48. Laboratory-MSC analytical chemistry course code CHA494-2 sections 16 practical's of 4 hours. Overall process of academic found effective.

#### Library : Dr. Darandale Shivaji Annashaeb

Verified procedure LIB-PR-02-Rev.00-Dated-15-06-2018, books, magazines, news papers etc, purchased and transactions carried out, the same is maintained as per university norms, books are stamped on first five pages, secrete page number and last five pages, accession number is given, accession number is stamped on the page where name of publisher and author is printed, accessioning bar coding and stamping is done on every book, magazine, reading room facility is made available in library, record of same is maintained. Library I-card is issued to each student duly stamped on photo of students, as per books availability books are issued and student I card is kept in safe custody, issuance are noted in issue register, return of book system from student is four days max and one day for reference, college has the system of penalty in case any student fails to return book in time, books are issued to staff as per requirement, issuance is noted in register, subject wise location, racks and rack level is identified, books stock verification is done at the end of academic year, sampled and verified issuance of to Member ID 12846 FYBSC computer SC, book stamped on subject matrix algebra and barcoding traceability. Library total books 29758, Reference books-6081, Other books, Journals, Magzine-4029, Library books ration-12:1. Overall process of Library found effective.

#### Admission : Mr. Vinayak Nimase.

Process consists of online admission, as per university norms, last date of online admission and submission of forms details, and required documents submission and eligibility criteria are declared, each stage of admission process is conducted as per planned schedule, the prospectus clearly indicates this schedule, monthly meeting are conducted to monitor and coordinate admissions and records of these meetings are maintained, the admission process comprises about the examination, the results of admission are displayed on notice board. sampled and verified the admission BSC UG Section, Form Number 1958645, dt. 02-08-2023, admission Pg Class MSC Form number 2002474 dt. 28-08-2023, college has the process of admission cancellation, cancellation received application from the student is authorized by the principal, reason of cancellation is verified and handover cancellation receipt to the student and fees refund accordingly to rules, confirmed admissions details are uploaded to the university portal eligibility numbers of each student are obtained in college login, verified the records of last year admission found maintained. Overall process

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found satisfactory.

Examination : Process consist of students exams are conducted by institute as per university syllabus, theory examination, practical oral examination, appointing of staff for exam, display of exam circulars, schedule of examination is declared by university, it is notified to the student via notice board, college website and students whatsapp group, online filling up of examination forms by students, examination forms approved and forwarded to the university, fees paid by students in the bank, actual time table declared by university, examination hall tickets are downloaded and distributed by the department, seating arrangement is prepared, junior supervisor orders are allotted, conduction of examination as per schedule, answer papers submission to CAP center, university declares result, marks sheets distributed to students, degree certificates distribution through convocation. sampled and verified the exam arrangement for the subject 111-MT Algebra 10 to 12 PM dt. 01-03-2023, number of students-26, Block-1 First year, 30 students 1 supervisor. counseling faculty members having poor result less than 60%, arrangement and conduction of remedial lecture in next semester for failed students. Overall process of examination found effective.

Administration-Training - Training are planned for faculties in house and external trainings, sampled and verified seven days faculty development program from 9th-15th Jan-2023, recruitment is done as per university norms, since last one year there is no new recruitment. Overall process of administration training found effective.

Hostel : Boys and Girls hostel infrastructure is in good condition, purified water 24 hrs is provided, cleaning of rooms, rest rooms schedule is in place, bed, coat, pillion is provided, mess facility is provided by institute. Overall process of Hostel is effective.

#### Canteen : Mr. Uday Palave.

College is inhabited with canteen inside the campus, the canteen has food and snacks, are provided in the canteen with reasonable price, documents related to canteen are made available in office, all aspect are non significant aspect. Overall process of canteen found effective.

Emergency Preparedness : Verified and found procedure for emergency response plan is in place, frequency for mock drill is identified, mainly for fire drill, inhalation of chemical solvent, flood, earthquake, building collapse, communication details and internal and external contacts are made available, verified mock drill of fire conducted on 03-07-2023, EPRP followed. Overall process of emergency preparedness found effective.

Waste Management : Waste management system established for collecting, segregating, storing and disposal of different types of wastes, like chemicals bottles, lab samples, papers, corrugated boxes, waste is handover to local grampanchayat, waste is categorized into biodegradable and non-biodegradable. overall waste management system found effective.

Maintenance & Utilities : Key process maintenance are identified by the organization through the list of computers and laptops and the adequate resources has been provided for the maintenance, institute has laid down preventive maintenance system that includes planned maintenance activities, preventive maintenance records for laptops, desktops, lab equipment's, building, DG, etc. subsequent corrective action is initiated to prevent its recurrence. Overall



process of maintenance and utilities found effective.

#### Process for Monitoring and Maintaining Compliance with Legal and Other Requirements

Legal and evaluation of compliance, compliance obligation : The institute has reviewed and updated its legal register which captures applicable legal as well as relevant requirements of relevant interested parties, a separate legal compliance evaluation cum monitoring plan is implemented to demonstrate compliance against determined legal and other requirements, verified compliance of legal requirements as below and observed satisfactory. CBCS-Choice based credit-19-05-2022-system-CB-485., Certificate of Accreditation-CGPA 3.02-Seven point scale, A-Grade, dt. 27-03-2022. UGC-2(f) and 12(B) UGC Act, 1991. The college is eligible to receive central assistance in terms of the rules framed under section 12(b) of the UGC Act, 1956. Drinking water testing and certificate through NABL lab, Borewell connection legal permission license for underground water, structural audit of college building for survival of ecosystem, Chemical flushing report, NPK and hydrological cycle, bio medical waste, hazardous waste, battery waste, rainwater harvesting and solar usage as per new DC rules, Permission to start of college-Ref. No.CA/1112, Memorandum of understanding between College and Grampanchayat Sonai, Choice Based Credit System-Ref. No. C.B.485, dt. 19-05-2022, Overall process of legal, evaluation of compliance found satisfactory.

#### Assessment of Implementation related to Significant Environmental Aspects

Environmental Aspect procedure-SOP-02, Planning of aspects, impact and analysis as applicable to the scope were reviewed from time to time and the current status with required controls and applicable legal requirements were available and followed. Process and sub-processes defined. Monitoring of aspect defined Department wise aspect / impact & risk register. Aspect / impact Risk register assessment procedure established, Criteria for analysis defined well, Function wise activities analyzed. Process wise aspect impact prepared and for monitoring procedures documented. sampled and verified aspect impact of the process, canteen, hostel, transporation, admin building, botany, bvoc food processing, chemistry lab, commerce department, laboratory, library, physics, zoology. Implementation related to significant environmental aspects found satisfactory.

#### Conclusions regarding risk assessment/risk treatment processes

College has determined the risk and opportunities, external internal issues, needs and expectations of interested parties are documented in Apex Manual-Issue No.-01, dt. 02.06.2022.

#### Conclusions regarding context of the organization

College has determined and documented the context in Apex Manul-ACS-E\_01-Isse No-01, dt. 02-06-2022. Issues determined as low competency on environmental related issues, old equipment's in labs not scaled up, needs and expectations determined as digital class.

#### Additional information/unresolved issues

NA



Communication/Changes during the visit (if applicable)

Change in Scope statement

#### **References to appendices:**

Interview record; Audit plan; Audit plan (as executed)

#### Have all shifts been audited:

Yes

# The audit has been performed according to audit plan meeting audit objectives, scopes and duration (on-site and off-site) as given within the audit plan

Confirmed - Audit conducted as per assignment letter and audit plan.

#### Have there been any changes to Scope?

Yes

Old Scope : Provision of Higher Secondary Education Bachelor's Degree, Diploma, Graduate and Undergraduate programs in Arts, Commerce Science Streams.

New. Scope : Tp Provide Education to UG & PG Students Under Faculty of Arts, Commerce and Science.

# Have there been any changes to Headcount?

No

Have there been any Address Changes?

No

#### Have there been any Sites Added / Removed?

No

Have there been any Other Changes?

No



## **LEAD AUDITOR RECOMMENDATION**

#### Lead Auditor's Recommendation for ISO 9001:2015

The nonconformity(ies) identified do not jeopardize the certification of the management system. Continued certification is therefore recommended pending acceptance of the corrective action plans(s) for identified nonconformity(ies).

#### Lead Auditor's Recommendation for ISO 14001:2015

The nonconformity(ies) identified do not jeopardize the certification of the management system. Continued certification is therefore recommended pending acceptance of the corrective action plans(s) for identified nonconformity(ies).

# OTHER OR ADDITIONAL LEAD AUDITOR RECOMMENDATION

NA

### **CLIENT ACKNOWLEDGEMENT**

| Client Representative Name and Mailing | Dr. Sadekar H. K.                                   |
|--|---|
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|  |   |

This report is based on a sample of evidence collected during the audit; therefore the results and conclusions include an element of uncertainty. This report and all its content is subject to an independent review prior to a decision concerning the awarding or renewal of certification.