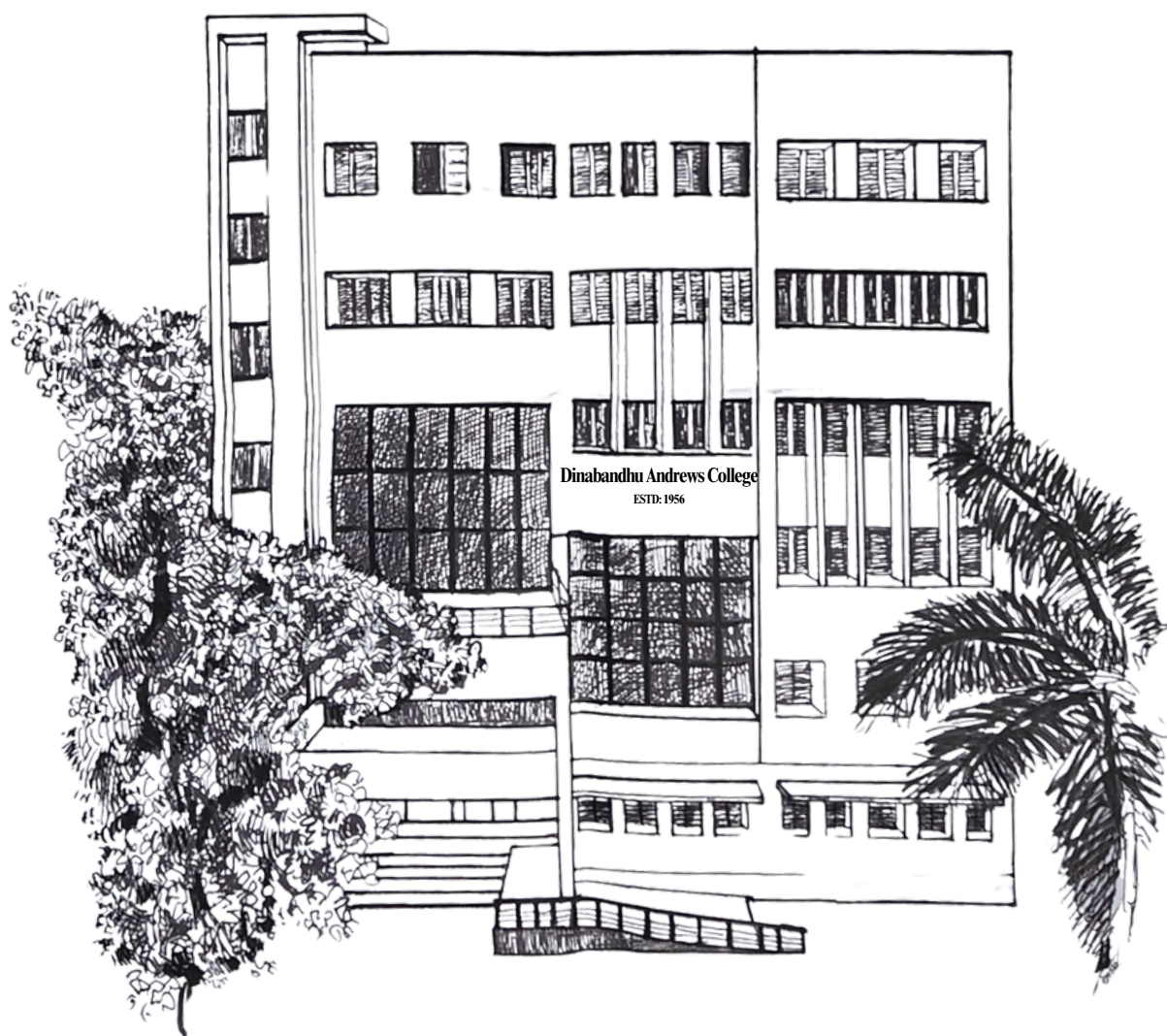




Dinabandhu Andrews College

AISHE CODE: C11955



CERTIFICATE



This is to Certify that the Management System of

DINABANDHU ANDREWS COLLEGE (AISHE Code: C-11955)

BAISHNABGHATA, P.O – GARIA, KOLKATA – 700084, INDIA

has been found to conform to the Environmental Management System standard:

ISO 14001:2015

This certificate is valid for the following scope of operations:

**PROVIDING HIGHER EDUCATION SERVICES TO UNDERGRADUATE &
POSTGRADUATE STUDENTS**

Certificate No.: IN56457B

<u>Date of initial registration</u>	<u>Date of this Certificate</u>	<u>Surv. audit on or before / Certificate expiry</u>	<u>Recertification Due</u>
08 February 2024	08 February 2024	07 February 2025	07 February 2027

This Certificate remains valid subject to satisfactory surveillance audits.



Director

For verification and updated information concerning the present certificate visit to http://staunchlyservices.com/search_certified_client.php
This Certificate is the property of Staunchly Management & System Services Limited and shall be returned immediately when demanded

STAUNCHLY MANAGEMENT AND SYSTEM SERVICES LIMITED

Labrynth Business Centre, 43 Middle Hill Gate,
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Web :- www.staunchlyservices.com

E-mail :- info@staunchlyservices.com

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Company Registered in England with Company Number 11488683





STAGE 1 AUDIT REPORT ISO 9001, ISO 14001, AND ISO 50001

SMS-FM-008A
Audit Report
(Rev05),

CERTIFICATION AUDIT REPORT

STAGE 1

Audited company: DINABANDHU ANDREWS COLLEGE

	Name and surname	Date	Signature
Report prepared by:	S P Mitra	15.12.2023	<i>S. P. Mitra</i>



STAGE 1 AUDIT REPORT

ISO 9001, ISO 14001, AND ISO 50001

SMS-FM-008A
Audit Report
(Rev05),

Name of the Organization	Dinabandhu Andrews College	
Address	54, Raja S C Mallick Road Baishnabghata, 24 Parganas (South), Kolkata, West Bengal 700084	
Site Address (If any)	NA	
No. of Employees	128	
E mail id	dacprincipal@gmail.com / dacddo@gmail.com	
Name of Management representative	Dr. Joy Sarkar	
Telephone/Fax	033 24071828	
Scope	Providing Educational Service leading to UG & PG	
Audit Team	S P Mitra	
Date of Audit	15.12.2023	
Brief about the organization (Legal Entity, Characteristics of business areas, Quality assets and Technology used)	Dinabandhu Andrews College, which has now become a premier institution of higher learning situated on the southern fringes of Kolkata, was founded in 1956 by an order of the Government of India with the object of facilitating the access to higher education for the children of the uprooted families from erstwhile East Pakistan (presently Bangladesh) who had settled, among other places, at Garia and its vicinity in the aftermath of the Partition of 1947.	
Audit Objective	<ul style="list-style-type: none"> a) Ensure that the client's management system documentation meets the requirements of the standard/specification. b) To conform that the client organization adheres to its own policies, Objectives and procedure and all the requirement of the QMS and SMS standard and other normative documents. c) To collect Quality for planning of stage II audit and determine the client's readiness for stage II audit including interval between stage I and Stage II audits. 	



STAGE 1 AUDIT REPORT

ISO 9001, ISO 14001, AND ISO 50001

SMS-FM-008A
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(Rev05),

REQUIREMENTS	Status C/NC/O	COMMENTS
QMS, EMS and EnMS Manual Reference	C	QMS, EMS and EnMS manual evidenced. QMS Manual – DAC-QM-01 Rev. no.- 00; Effective Date: 28/09/2023 EMS Manual – DAC-EMS-01 Rev. no.- 00; Effective Date: 28/09/2023 EnMS Manual – DAC-EnMS-01 Rev. no.- 00; Effective Date: 28/09/2023
Is Quality, Environment and Energy Management Policy and Objectives Designed, documented and approved? (includes framework of Objective, Legal, statutory and contractual requirements, aligned with Risk Management and criteria of Risk Evaluation)	C	Quality, Environmental and Energy Management Policy available.
Is scope of Management Systems Included in Manual and having boundaries?	C	Manuals consist of scope of management system for QMS, EMS & EnMS
Does manual include Details of exclusions with justifications?	C	Yes. Clause 8.3 not applicable for this college.
Is Risk Assessment process defined? (Method, Identification of assets, threats and vulnerabilities, Impact on organization CIA, owner, Risk Register, Acceptable Risk level, Method of selection of Control)	C	Risk Management Process is documented for QMS, EMS and EnMS QMS Risk Management Procedure - DAC/Q/SOP/R&O/01 Dated – 28/09/2023 Issue no.-00 Rev No. -00 EMS Risk Management Procedure - DAC/E/SOP/AI/01 Dated – 28/09/2023 Issue no.-00 Rev No. -00 SOP for Risk management is available and risk registers are maintained. Criteria clearly defined for High / Medium / Low in Impact / Probability in Risk register for QMS, EMS and EnMS. Detailed will be verified during stage II
Is Risk Treatment process prepared drafted and approved? (Report and plan no. date)		Will be verified during Stage-2
The results of the risk assessments and risk treatment documented.		Will be verified during Stage-2



STAGE 1 AUDIT REPORT

ISO 9001, ISO 14001, AND ISO 50001

SMS-FM-008A
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(Rev05),

REQUIREMENTS	Status C/NC/O	COMMENTS
Are other procedure or control in support of Management Systems are defined and documented?	C	As per the MR, Dr. Joy Sarkar, all relevant Policy and procedures are available and the process in place. Compliance will be verified during Stage-2 Emergency response and disaster management plan available. Effectiveness will be verified during stage II audit.
Are records required by ISO 9001, ISO 14001 and ISO 50001 are documented, implemented and maintained.	C	Found ok.
Are Internal audits conducted as planned and evidence of the audit programme(s) and the audit results available (Frequency, Date of Last Internal Audit, Conducted by)	C	Academic audit was conducted. Internal audit conducted on 05.10.2023. Report available. Detailed will be audited during Stage -2.
Are Management reviews conducted as planned? (Frequency, Date of Last MRM, Chaired by, Agenda)	C	Governing Body Meeting was evidenced. MRM conducted on 13.10.2023. Detailed will be audited during Stage -2.
Evidence of the nature of nonconformities identified and any subsequent actions taken and corrective actions available	C	03 observations were raised in internal audit. Closed Effectiveness will be verified during stage II audit.
Are evidence of the monitoring and measurement results documented?	C	Attendance monitoring system found satisfied.
Are the Incidents recorded? Is there evidence of resolving the same?		Will be audited during Stage -2.
Are there any open Incidents?		Will be audited during Stage -2.
Is evidence of the competence of the resources available?		Will be audited during Stage -2.
Is Operational planning and control documented?	C	As per auditee academic plans are available with respective authority, compliance will be audited during Stage -2.



STAGE 1 AUDIT REPORT ISO 9001, ISO 14001, AND ISO 50001

SMS-FM-008A
Audit Report
(Rev05),

REQUIREMENTS	Status C/NC/O	COMMENTS
Any Statutory and/or regulatory requirements applicable to organization or technical area identified and complied with?	C	Affiliation Certificate by University

Observations (Areas Of Concerns Which May Be Identified as Non-Conformities During Stage 1 Audit)

1. ISO awareness training need to be conducted frequently for better understanding the requirements of the standard of ISO 9001, ISO 14001, ISO 50001
2. Mock drill planning need to be required

SUMMARY

Audit is conducted followed by the basic objective to check the preparedness to conduct the compliance audit as per the standard of ISO 9001:2015, ISO 14001:2015 & ISO 50001:2018. As per the objective of stage 1 audit college prepare all the basic requirements of the standard through documentation. All the information provided during application found adequate.

Based on the documented review recommended to conduct stage II audit to check the compliance.



STAGE 2 AUDIT REPORT
ISO 9001, ISO 14001, AND ISO 50001

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CERTIFICATION AUDIT REPORT

STAGE 2

Audited company: DINABANDHU ANDREWS COLLEGE, GARIA

	Name and surname	Date	Signature
Report prepared by: Lead auditor	S P Mitra	30/01/2024	S. P. Mitra



STAGE 2 AUDIT REPORT ISO 9001, ISO 14001, AND ISO 50001

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OPENING MEETING

TOPICS FOR DISCUSSION	✓
Introduction of SMS staff/ Audit Team and their Roles	Yes
Introduction of company staff	Yes
Confirm statement of confidentiality, Information security and agreement of all participants to the Audit Plan.	Yes
Confirm the assessment standard, Audit Objectives & Criteria	Yes
Confirm number of sites, employees, working hours (e.g. shift patterns, early finishes, holiday shutdowns etc. Details of major changes within the company (staff, new processes, business, premises, confirmation of relevant work safety, emergency and security procedures for the audit team;)	Yes
The Audit plan and other relevant arrangements with the auditee such as the date and time for the closing meeting, any interim meetings between the audit team and the auditee's management, and any change(s) needed.	Yes
Confirm scope of registration. (please record scope): PROVIDING HIGHER EDUCATION SERVICES TO UNDERGRADUATE & POSTGRADUATE STUDENTS	Yes
Confirmation of the status of findings of the previous certification, review or audit and their status(if applicable).	N/A
confirmation that, during the audit, the client will be kept informed of audit progress and any concerns;	Yes
Explain how assessment will be undertaken <ul style="list-style-type: none"> • Refer to assessment programme, methods and procedures to be used to conduct the audit based on sampling • Formal communication channels between the audit team and auditee. • Describe method of non-compliance reporting, grading & conditions under which the audit may be prematurely terminated; • The method of reporting audit Findings including criteria for grading if any and how to deal with possible findings during the Audit. • Language of audit and reporting; English • Major non-compliance early warning • Assessors need to question individuals not just guides • Closing meeting and who should be present 	Yes
Confirm status of company's management system.	Yes
Confirm guides are available.	Yes
Confirm office facilities are available.	Yes
Confirm lunch arrangements.	Yes
Review H & S and Trade Union arrangements.	Yes
Invite questions.	Yes
Final preparation for team (10 minutes)	Yes



STAGE 2 AUDIT REPORT ISO 9001, ISO 14001, AND ISO 50001

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Name of the Organization	Dinabandhu Andrews College		
Address	54, Raja S C Mallick Road Baishnabghata, 24 Parganas (South), Kolkata, West Bengal 700084		
Site Address (If any)	NA		
No. of Employees	128		
E mail id	dacprincipal@gmail.com / daedde@gmail.com		
Name of Management representative	Dr. Joy Sarkar		
Telephone/Fax	033 24071828		
Scope	PROVIDING HIGHER EDUCATION SERVICES TO UNDERGRADUATE & POSTGRADUATE STUDENTS		
Audit Team	S P Mitra(LA)	K C Poddar (TM)	Bikas Chandra Pal (TM)
Date of Audit	30-January-2024		
Brief about the organization (Legal Entity, Characteristics of business areas, Quality assets and Technology used)	Named after Rev. Charles Freer Andrews (1871-1940), the renowned Christian missionary, educationist, and philanthropist, Dinabandhu Andrews College, which has now become a premier institution of higher learning situated on the southern fringes of Kolkata, was founded in 1956 by an order of the Government of India with the object of facilitating the access to higher education for the children of the uprooted families from erstwhile East Pakistan (presently Bangladesh) who had settled, among other places, at Garia and its vicinity in the aftermath of the Partition of 1947.		
Audit Objective	<p>a) Ensure that the client's management system documentation meets the requirements of the standard/specification.</p> <p>b) To conform that the client organization adheres to its own policies, Objectives and procedure and all the requirement of the QMS, EMS and EnMS standard and other normative documents.</p> <p>c) To collect Quality for planning of stage II audit and determine the client's readiness for stage II audit including interval between stage I and Stage II audits.</p>		



STAGE 2 AUDIT REPORT ISO 9001, ISO 14001, AND ISO 50001

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Audit Result:

Management system implementation has been verified by means of random sampling. This applies to the compliance of workflows with standard requirements and the descriptions in management system documentation. This has been done by means of a sampling approach, by conducting interviews and reviewing the appropriate documentation. Audit findings and recommendations regarding opportunities for improvement have been set below.

The current audit revealed no non conformity for the standard of ISO 9001:2015, ISO 14001:2015 and ISO 50001:2018

The Institution has established and maintained an effective system to ensure compliance with its policy and objectives. The audit confirms in line with the audit target that Institution's management system complies with, adequately maintains and implements the requirements of the standard.

Institution has been recommended for the award of the new certificate on ISO 9001:2015, 14001:2015 and 50001:2018 standards for the following scope: **PROVIDING HIGHER EDUCATION SERVICES TO UNDERGRADUATE & POSTGRADUATE STUDENTS**

The audit findings related to the audited standard are listed in the below annexure to this report. In view of the sampling approach applied to the audit, weaknesses and non conformities may still exist which have not been identified during the audit.

Positive Findings:

1. Good support from the top management in implementation of QMS, EMS and EnMS.
2. Good initiative for conducting yearly fire drill in the institution.
3. Initiatives taken for Reduction of paper usage by promoting use of technology in library management, accounting system management, HRMS implementation and teaching learning system.
4. Well developed infrastructure like good library, Smart classroom, laboratory etc.

Recommendations and Opportunities for improvement:

1. QMS, EMS and EnMS Policy need to be displayed in each Department and in website to ensure it is properly circulated amongst all the interested parties.
2. Energy baseline of electricity consumption is done based on total consumption of the institution; however, building-wise consumption measurement may be taken-up to have a more effective system.
3. Energy records of electricity consumption is done based on total consumption of the institution; however, building-wise consumption measurement may be taken-up to have a more effective system.
4. Procurement policy may be implemented considering the energy efficiency and environment friendliness aspect as one of the major criteria while selecting the item to be procured and Vendor selected.



**STAGE 2 AUDIT REPORT
ISO 9001, ISO 14001, AND ISO 50001**

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5. Detailed course planning needs to be documented in proper format by which it can be evaluated. Planning is required as a when received by the departmental head and subsequently execution against lecture delivered with observation to be documented.
6. Slow learner identification needs to be defined and documented for further evaluation.
7. Student support programme needs to be conducted & certificate to be issued by the concern authority.



STAGE 2 AUDIT REPORT ISO 9001, ISO 14001, AND ISO 50001

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ISO 9001-2015 (QMS), ISO 14001-2015 (EMS), ISO 50001-2018 (EnMS) Requirements	Comments	C/O/NCR
4.1 Understanding the organization and its context - QMS + EMN + EnMS	<p>Met with the Principal Dr. Somnath Mukhopadhyay and Senior teachers and HODs present. The institute has set up their mission and vision in the website https://www.dacollege.org/vision-mission.html.</p> <p>QMS: Clause 4.1 of Quality Manual DAC-QM-01 Rev 0 dated 28/09/2023 approved by the principal evidenced. Annex 1 Rev 0 dated 28/09/2023 indicates 3 external issues and 4 internal issues.</p> <p>EMS: Clause 4.1 of EMS Manual DAC-EMS-01 Rev 0 dated 28/09/2023 approved by the principal evidenced. Annex 1 Rev 0 dated 28/09/2023 indicates 10 issues.</p> <p>EnMS: Clause 4.1 of EnMS Manual DAC-EnMS-01 Rev 0 dated 28/09/2023 approved by the principal evidenced. Annex 1 DAC/EnMS/IE/01 Rev 0 dated 28/09/2023 indicates 7 external issues and 6 internal issues.</p>	C
4.2 Understanding the needs and expectations of interested parties - QMS + EMN + EnMS	<p>Needs and expectations of various interested parties identified and documented. This has been discussed in MRM.</p> <p>Clause 4.2 of Quality Manual DAC-QM-01 Rev 0 dated 28/09/2023 approved by the Principal evidenced. Annex 2 Rev 01 dated 28/09/2023 evidenced indicating 7 interested parties and their need and expectation on QMS.</p> <p>Clause 4.2 of EMS Manual DAC-EMS-01 Rev 0 dated 28/09/2023 approved by the Principal evidenced. Annex 2 Rev 0 dated 28/09/2023 identifies 7 interested parties and their need and expectation on EMS.</p> <p>Clause 4.2 of EnMS Manual DAC-EnMS-01 Rev 0 dated 28/09/2023 approved by the Principal evidenced. Annex 2 DAC/EnMS/IP/01 Rev 0 dated 28/09/2023 identifies 7 interested parties and their need and expectation on EnMS.</p>	C
4.3 Determining the scope of the quality management system - QMS 4.3 Determining the scope of the environmental management system - EMS 4.3 Determining the scope of the energy management system - EnMS	<p>Scope of the IMS has been determined and documented.</p> <p>Clause 4.3 of QM-01 Rev. no.- 00; Effective Date: 28/09/2023 details out the scope of the QMS being: "PROVIDING HIGHER EDUCATION SERVICES TO UNDERGRADUATE & POSTGRADUATE STUDENTS".</p> <p>Clause 4.3 of EMS-01 Rev. no.- 00; Effective Date: 27/05/2023 details out the scope of the EMS being: "PROVIDING HIGHER EDUCATION SERVICES TO UNDERGRADUATE & POSTGRADUATE STUDENTS".</p> <p>Clause 4.3 of DAC-QM-01 Rev 0 dated 28/09/2023 details out the scope of the QMS. As per the IQAC co-ordinator, the same scope will apply to EnMS being: "PROVIDING HIGHER EDUCATION SERVICES TO UNDERGRADUATE & POSTGRADUATE STUDENTS".</p>	C
4.4 Quality management system and its processes - QMS 4.4 Environmental management system - EMS	<p>All the processes involved in IMS have been identified and analysed. Their interaction has been established.</p> <p>Processes / Procedures are adequately established and implemented to continually improve QMS, EMS and EnMS aligned with the affiliation bodies requirements.</p>	C



STAGE 2 AUDIT REPORT ISO 9001, ISO 14001, AND ISO 50001

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ISO 9001-2015 (QMS), ISO 14001-2015 (EMS), ISO 50001-2018 (EnMS) Requirements	Comments	C/O/NCR
4.4 Energy management system - EnMS	<p>The Institution has constituted 12-member governing Body which is the highest decision-making body for the institution's Governance, as evidenced in the website https://www.dacollege.org/governing-body.html</p> <p>These processes are appropriately reviewed and controlled by different committees under the leadership of the Principal.</p> <p>Clause 4.4 of QM-01 Rev. no.- 00; Effective Date: 28/09/2023 evidenced which contains the process flow diagram. IQAC (Internal Quality Assurance Cell) is the highest body responsible for overseeing Quality Management System (QMS).</p> <p>Clause 4.4 of EMS-01 Rev. no.- 00; Effective Date: 28/09/2023 evidenced which contains the process flow aligned with PDCA cycle. IQAC (Internal Quality Assurance Cell) is the highest body responsible for overseeing Environmental Management System (EMS).</p> <p>Clause 4.4 of EnMS-manual DAC-EnMS-01 Rev. no.- 00; Effective Date: 28/09/2023 evidenced. IQAC (Internal Quality Assurance Cell) is the highest body responsible for overseeing Environmental Management System (EMS).</p>	
5.1 Leadership and commitment - QMS + EMN + EnMS 5.1.1 General - QMS 5.1.2 Customer focus - QMS	<p>Leadership found dynamic and motivating. Relationship between teachers, Student & Staff found very cordial and friendly. Interest of students are being taken care of by Principal & Teachers. All necessary facilities for effective learning have been provided by to leadership.</p> <p>Discussed with the Principal Dr. Somnath Mukhopadhyay. He is the Secretary of the 12-member Governing Body which is topmost authority of the institution and supporting the operation of the institutions and implementation of improvement initiatives.</p> <p>The principal and teachers were found to have good rapport.</p> <p>Management is committed to maintaining the management system and continuous improvement. This is evident from the setting up different committees and empowering to decision making on various issues and suggesting improvement. Details of administrative body/Committee evidenced on the website under "https://www.dacollege.org/uploads/forms/scom2023.pdf" link, vide memo no. DAC/N-58/2023-24, dt.17.07.2023.</p> <p>Establishment of policy – The instite has set up their mission and vision in the website https://www.dacollege.org/vision-mission.html.</p> <p>Satisfaction of legal and regulatory requirement - The institution is affiliated to Calcutta University as evidenced.</p> <p>Communication of the importance of effective QMS – It is evident from the interview with HOD and teaching staffs in various departments, they are aware of the requirements of QMS, EMS and EnMS.</p> <p>Empowered people to contribute to the effectiveness of the management</p>	C




STAGE 2 AUDIT REPORT ISO 9001, ISO 14001, AND ISO 50001

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ISO 9001-2015 (QMS), ISO 14001-2015 (EMS), ISO 50001-2018 (EnMS) Requirements	Comments	C/O/NCR
	<p>system and supporting other relevant management roles – Evidenced various committees and also various departments delivering the teaching and learning service to students and further to the teachers, non-teaching staffs, laboratory staffs, Librarian etc</p> <p>Determination and consideration of risks and opportunities that may effect the conformity of services – The Institution has a SOP for planning to address risk and opportunities as evidenced in the management system manuals.</p> <p>Focus on increasing customer satisfaction – This is evident from the 2-way engagement mechanism in-built in the operation like:</p> <ol style="list-style-type: none"> Feedback system for Students, Employees and Guardians Grievance Redressal Committee, Anti Ragging Committee, Internal Complaints Committee Parent Teacher meeting, Special meetings with guardians in case of critical issues 	
<p>5.2 Policy - QMS</p> <p>5.2.1 Developing the quality policy - QMS</p> <p>5.2.2 Communicating the quality policy – QMS</p> <p>5.2 Environmental policy - EMS</p> <p>5.2 Energy policy - EnMS</p>	<p>The Institution has established its policy in its Manual, aligned to its Vision and Mission. This complies with the requirements determined by the ISO 9001: 2015, ISO 14001:2015 & ISO 50001:2018 standard. It is documented & displayed in prominent location within the campus. By the interviewing process it is confirmed that that policy is communicated verbally to all interested parties.</p> <p>It is evidenced that the management system policy is:</p> <ol style="list-style-type: none"> Appropriate to the purpose and context of the Institution. It includes a commitment to comply with the requirements and to continuously improve the effectiveness of the quality management system. Provides a framework for establishing and reviewing quality objectives; <p>EnMS policy is evidenced is part of the manual DAC/EnMS/01 Rev 0 dated 28/09/2023. The policy is displayed at prominent locations within the campus. As per IQAC co-ordinator it has been informed to the concerned person to display the policy on the website, however the same is yet to be implemented.</p> <p><i>QMS, EMS and EnMS Policy need to be displayed in each Department and in website to ensure it is properly circulated amongst all the interested parties.</i></p>	Obs-01
<p>5.3 Organizational roles, responsibilities and authorities - QMS + EMN + EnMS</p>	<p>Roles and responsibilities of Teachers, Staff etc has been determined and documented. This has been communicated to concern people.</p> <p>Institution structure for QMS is well defined and documented in Quality Manual Annex-4 Organization structure Rev 0 dt. 28.09.2023. Role and responsibility of major functions under QMS are documented in Annex-5 Roles and responsibilities Rev 0 dt. 28.09.2023.</p> <p>Institution structure for EMS is well defined and documented in EMS Manual Annex-4 Organization structure Rev 0 dt. 28.09.2023. Role and responsibility of major functions under EMS are documented in Annex-5 Roles and responsibilities Rev 0 dt. 28.09.2023.</p>	C

	<h2 style="text-align: center;">STAGE 2 AUDIT REPORT</h2> <h3 style="text-align: center;">ISO 9001, ISO 14001, AND ISO 50001</h3>	Work Order Nr.:
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ISO 9001-2015 (QMS), ISO 14001-2015 (EMS), ISO 50001-2018 (EnMS) Requirements	Comments	C/O/NCR
	Institution structure for EnMS is well defined and documented in EnMS manual DAC/EnMS/01 Rev 0 dated 28/09/2023, Role and responsibility of major functions under EnMS are documented. The roles, responsibilities and authorities related to the management system is given under Annexure 4 of this manual.	
6.1.2 Actions to address risks and opportunities – QMS + EnMS IMS 6.1 Actions to address risks and opportunities – General, Environmental aspects, Compliance obligations, Planning action - EMS	<p>Various risk has been identified and rated. Mitigation planning against each risks have been done and action implemented. Planning for risk review done i.e. annually.</p> <p>The Institution has adopted the risk based thinking approach in order to ensure that its QMS, EMS and EnMS provides its intended results, enhancing the positive aspects whereas reducing the undesirable aspects and also promotes improvement.</p> <p>QMS - SOP for planning to address risk and opportunities DCR/SOP/R&O/01 Rev 0 dated 28.09.2023 and the Risk Register DAC/RR/01 dated 28.09.2023 is evidenced.</p> <p>EMS - SOP for Environmental aspect impact DAC/E/SOP/A1/01 dated 28.09.2023 and the Aspect Impact register DAC/EMS/RR/01 dated 28.09.2023 is evidenced.</p> <p>EnMS - SOP for planning to address risk management DAC/EnMS/SOP/R&R/01 dated 28.09.2023, and the Risk Register DAC/RR/EnMS/01 dated 01.10.2023 is evidenced.</p>	C
6.2 Quality objectives and planning to achieve them – QMS 6.2 Environmental objectives and planning to achieve them - EMS 6.2 Objectives, energy targets and planning to achieve them - EnMS	<p>Objective have been taken on QMS, EMS & EnMS and action plan for achievements prepared for the year 2024.</p> <p>QMS - Annex 6 dated 28.09.2023 evidenced. Identified 3 quality objectives, activities initiated on all the objectives as informed by the IQAC Co-ordinator.</p> <p>EMS - Annex 6 dated 28.09.2023 evidenced. Identified 2 EMS objectives, activities initiated on all the objectives as informed by the IQAC Co-ordinator.</p> <p>EnMS - Annex 5 DAC/EnMS/OBJ/01 Rev 00 dated 28.09.2023 evidenced. Identified 7 EnMS objectives, activities initiated on all the objectives as informed by the IQAC Co-ordinator.</p>	C
6.3 Planning of changes – QMS 6.3 Energy review - EnMS	<p>There were no changes to date since the establishment of the QMS as per the IQAC co-ordinator. All changes in the Quality Manual will be approved by the Principal.</p> <p>The College maintain documented information the methods and criteria used to develop the energy review as per Annexure-6 DAC/EnMS/ER/01 Revision 00 Issued 28/09/2023. Energy review record is documented in the Record Format No. 02 describing For the previous year (for actual assessments): Ended on 31st March 2023 and For the current year (for future estimates): Began on 1st April 2023.</p>	C
6.4 Energy performance indicators - EnMS	Method of determining EnPI is documented in Annexure-7 DAC/EnMS/EnPI/01 Revision 00 Issued 28/09/2023	C



STAGE 2 AUDIT REPORT ISO 9001, ISO 14001, AND ISO 50001

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ISO 9001-2015 (QMS), ISO 14001-2015 (EMS), ISO 50001-2018 (EnMS) Requirements	Comments	C/O/NCR
6.5 Energy baseline - EnMS	Energy Baseline recorded. Actual Energy Performance of Dinabandhu Andrews College for the FY 2022-2023 evidenced. <i>Energy baseline of electricity consumption is done based on total consumption of the institution; however, building-wise consumption measurement may be taken-up to have a more effective system.</i>	Obs-02
6.6 Planning for collection of energy data - EnMS	Data collection is done from electricity bills. Format-4 ENERGY MEASUREMENT PLAN AND RECORD for FY 2023-2024 evidenced. <i>Energy records of electricity consumption is done based on total consumption of the institution; however, building-wise consumption measurement may be taken-up to have a more effective system.</i>	Obs-03
7.1 Resources – General, People, Infrastructure, Environment for the operation of processes, Monitoring and measuring resources - Measurement traceability, Organizational knowledge – QMS 7.1 Resource – EMS + EnMS	<p>Resources are provided as per requirement. Good infrastructure i.e; Good building, Class rooms, Teaching facilities have been provided. Well developed laboratories and library has been provided. Digital classrooms, playground recreation center found available. Computer and internet facilities have been provided. Environment of total building including classrooms found good.</p> <p>The institution provide and maintain the environment necessary for the teaching, learning and evaluation.</p> <p>The institution has constituted multiple committees, various departments with people resources teachers, non-teaching staffs, laboratory staffs, Librarian etc. Committees includes for managing QMS, EMS and EnMS.</p> <p>The institution has class rooms both general and smart, laboratories and other non-academic facilities like Hostel, Canteen etc with adequate infrastructure. Visited the Library reading hall, ambience is found to be for the purpose. Clause 7.1.3 of Quality Manual Rev.0 dt 28.09.2023 mentions the infrastructure aspects in detail covering library and communication systems including the others.</p> <p>Visited the Library, they have implemented LMS for online searching and issue of books. Adequate infrastructure is available in Library including reading room, books etc.</p> <p>Adequate light, ventilation, computer facilities are also found as per requirements. Clause 7.1.7 of Quality Manual Rev.0 dt 28.09.2023 mentions the infrastructure aspects in detail covering Social, Psychological and Physical environment which were verified with the information in website and during site visit and visiting various departments and facilities during the audit.</p> <p>In laboratory, measuring equipments are found but not recorded in a proper format. However, calibration Lab instruments is done by internally when required. Need for proper calibration may be considered for providing realistic result coming out of equipments in laboratories.</p> <p>Clause 7.1.6 of Quality Manual Rev.0 dt 28.09.2023 mentions how the institution leverages different internal and external sources as knowledge for enhancement of the QMS. While discussing with the HOD's and teaching staffs during the visit of departments the endeavour to improve the course material, teaching methodology considering past experience was expressed by auditees.</p>	O



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ISO 9001-2015 (QMS), ISO 14001-2015 (EMS), ISO 50001-2018 (EnMS) Requirements	Comments	C/O/NCR
	<p>Clause 7.1 of EMS Manual dated 28.09.2023 evidence describing the resources for EMS.</p> <p>Clause 7.1 of EnMS Manual DAC-EnMS-01 Rev. no.- 00; Effective Date: 28/09/2023 evidence describing the resources for EnMS.</p>	
7.2 Competence – QMS+ EMS + EnMS	<p>Competence mapping for teachers and staff have been done with details of qualification and experience.</p> <p>As a govt. Approved college, all the competency criteria is defined by govt. of Odisha.</p> <p>Competence of the teaching staffs are evidenced on the website under the departmental profile or under list of staff.</p>	C
7.3 Awareness – QMS+ EMS + EnMS IMS	<p>Awareness among all the teachers and staff are conducted internally. No record found. However they plan for the awareness training for the year 2024. It will be verified during the next surveillance audit.</p> <p>Departments are organizing seminars time to time which was evidenced from the departmental activity. A poster on the importance of the QMS, EMS and EnMS was evidenced at the entrance of the institution.</p>	C
7.4 Communication – QMS+ EMS + EnMS	<p>Interneal and external Communications are done as per communication procedure. Various Whatsapp have been formed for communication for lesson teaching.</p> <p>Clause 7.4 of Quality Manual Rev.0 dt . 28.09.2023 mentions how the communication system is planned between stake holders.</p> <p>Notices from the Institutions for colleges, students are displayed in the notice board for broad communication. Feedback surveys conducted</p>	C
7.5 Documented information – General, Creating and updating, Control of documented information – QMS+ EMS + EnMS	<p>All information found documented.</p> <p>Very good documentation established by the Institution with the support from relevant stakeholders related to Services.</p> <p>The Institution has maintained its Quality Manual, Environment management system manual, Energy management system manuals and its annexures with proper identification, revision, and dates.</p> <p>Inspected record / planning of teaching learning in different departments. Inspected procurement records and found maintained properly.</p> <p>The Library has implemented the LMS library management system which ensures keeping proper identification, traceability along-with its management of issue, return and searching of necessary item easily even making it available on-line.</p>	C
8.1 Operational planning and control – QMS+ EMS + EnMS	<p>For QMS - Clause 8.1 of QM-01 dated 28/09/2023 evidenced describing operation planning and control for QMS. The institution has planned its operations as per its defined QMS. The framework evidenced include preparation of semester class distribution amongst the teachers considering</p>	C



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ISO 9001-2015 (QMS), ISO 14001-2015 (EMS), ISO 50001-2018 (EnMS) Requirements	Comments	C/O/NCR
	<p>their expertise covering the syllabus and arrives the semester routine for the subjects, this is done by the HOD. Concerned teachers prepares their lesson plan as per the assigned classes covering the syllabus and guidelines by the University/UGC/NCTE. Evaluation is done as per the University/UGC/NCTE criteria dividing into internal, external, attendance, practical etc. Workshops, special classes, mentoring etc. also planned for helping weak students and to provide opportunity to students for lateral knowledge enhancement.</p> <p>For EMS - Clause 8.1 of EMS-01 dated 28/09/2023 evidenced describing operation planning and control for EMS. Concerned committee plan for activities and monitors the activities. Operation procedure DAC/E/SOP/OPN-01 dated 28.09.2023 evidenced.</p> <p>For EnMS - Clause 8.1 of DAC-EnMS-01 Rev. no.- 00; Effective Date: 28/09/2023 evidenced describing operation planning and control for EnMS. Concerned committee plan for activities and monitors the activities.</p>	
8.2 Requirements for products and services - Customer communication, Determining the requirements related to products and services, Review of requirements related to products and services, Changes to requirements for products and services - QMS	<p>All teaching, learning and evaluations are planned as per the guideline of the accreditation body to which the Institution is affiliated viz, Calcutta University</p> <p>There is limited scope to the Institution in determining the requirements for services.</p>	C
8.2 Emergency preparedness and response - EMS	<p>For EMS - Clause 8.2 of EMS-01 dated 28/09/2023 evidenced describing emergency preparedness and response procedure outline.</p> <p>Different types of possible emergencies like fire, earthquake have been considered and controlled, handling plan has been developed described and documented.</p>	C
8.2 – Design – EnMS	<p>For EnMS - Clause 8.2 of DAC-EnMS-01 Rev. no.- 00; Effective Date: 28/09/2023 evidenced describing emergency preparedness and response procedure. Initiatives taken for energy management includes awareness, restricting usage of energy, implementation of energy conservation initiatives.</p>	C
8.3 Design and development of products and services - General, Design and development planning, Design and development inputs, Design and development controls, Design and development outputs, Design and development changes - QMS	<p>The Institution provides education services as per the syllabus of affiliation body hence there is no scope of service design.</p>	C
8.3 Procurement - EnMS	<p>Interviewed the Principal and HOD of Microbiology dept. The institution is promoting the use of an on-line system to reduce paper consumption. Annexure-9 Criteria for Purchasing Equipment evidenced vide DAC/EnMS/PE/01 Revision 00 Issued 28/09/2023 evidenced. As informed by the Principal, procurement decisions for equipment are made considering the lower price quotations.</p>	Obs-04



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ISO 9001-2015 (QMS), ISO 14001-2015 (EMS), ISO 50001-2018 (EnMS) Requirements	Comments	C/O/NCR
	<i>Procurement policy may be implemented considering the energy efficiency and environment friendliness aspect as one of the major criteria while selecting the item to be procured and Vendor selected.</i>	
8.4 Control of externally provided processes, products and services 8.4.1 General 8.4.2 Type and extent of control 8.4.3 Information for external providers	Procurement records of Library study table evidenced. Procurement planning evidenced.	C
8.5 Production and service provision - QMS 8.5.1 Control of production and service provision 8.5.2 Identification and traceability 8.5.3 Property belonging to customers or external providers 8.5.4 Preservation 8.5.5 Post-delivery activities 8.5.6 Control of changes 8.6 Release of products and services - QMS	<p>Physics Department Notification No.: CSR/ 18/2023 (Syllabus, Theory and practical) found evidenced. Departmental routine of 1st/3rd/5th semester checked and found available. Syllabus distribution, even sem available. Lesson plan (Theory+ practical) available. Practical experimental report of a student Sayel Chakraborty (Sem 5) verified.</p> <p>Geography Curriculum and credit framework for under gradutae course in Geography- Syllabus effective from 2023-24 session available. Routine for Geography department 2023 verified. Practical laboratory notebook of a student Roll No.:213052-21-0032 checked and verified.</p> <p>Zoology Department Meet with Dr. S Gupta/ Associate Professor - Head Msc Phd 4th semester course verified course planning and execution not evident. Total student: 30 Class attendance, internal exam, total assessment of student Shilpa Mondal Roll No.: 052-1212-0522-21 verified. Student parent meeting held on 03.01.2024 and 02.01.2024 with feedback documented.</p> <p>Botany: Meet with Head Dr. Rupa Chakraborty/ Asst. Professor/ Head- Msc & Phd Kanyashree Nodal Officer. Verified the 4th Sem Course. Detailed course planning not available. Student attendance checked under teacher K Choudhury/ SACT-1, Msc Phd Class student-15. Attendance record evidenced. Internal, attendance & practical of student Anurag Chattopadhyaya Roll No.: 052-1111-0259-21 checked found adequate. Extra curriculum activities like food festival, photography competition, massroom cultivation process, medicinal plant garden defined and documented.</p> <p>Botany: Verified the extra curriculum activity like YASH Relief work in Sundarban Area/ Debipur Gram Panchayet dated 29.06.2021 and Amphan Relief camp for distribution of clothing and food dated 27.06.2022, and document evidenced.</p>	O



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ISO 9001-2015 (QMS), ISO 14001-2015 (EMS), ISO 50001-2018 (EnMS) Requirements	Comments	C/O/NCR
	<p>Microbiology: 5 teachers, SACT -2, CSC – 3 Nos, 4 of them are doctorate, 1 is pursuing Doctorate. Department has UG 3 batch of students, study is done in Semester system under CU affiliation. Batch size 40 approx. Admission is done on merit basis as per CU criteria. Medium of education – English. Checked syllabus of MCB-Sec 101-Theory, Credits 4, approx. 30 Hrs. Classroom material evidenced in Google classroom. At the start of each Semester, subjects are allotted to teachers by the HOD based on their expertise. Teachers prepare lesson plans on a class-to-class basis, records are kept by concerned teachers in their personal storage. Attendance registers are kept in the department, the same as 5th Semester subject CC11,12, DSE-A1, 182 evidenced with 34 students on-board. Record of remedial classes are not found. Internal evaluation is done subject code –DSE-A-1 for 20213133 dated 19/12/2023, marks 10/10 found. Evaluation is done 2 times and year. Class test is taken after completion of each unit. Roll no. 2022122, paper cc 1, dated 06.02.2023 evidenced. These records are maintained by teachers. Remedial class records of 02/11/2023, 06/11/2023, 09/11/2023 for Molecular Biology evidenced in WhatsApp group message. No institutional records are found.</p> <p>During the Departmental visit improvement areas identified mentioned below.</p> <ol style="list-style-type: none"> <i>1. Detailed course planning needs to be documented in the proper format by which it can be evaluated. Planning is required as a when received by the departmental head and subsequently execution against lecture delivered with observation to be documented.</i> <i>2. Slow learner identification needs to be defined and documented for further evaluation.</i> <i>3. The student support program needs to be conducted & certificate to be issued by the concern authority.</i> 	<p>Obs-05</p> <p>Obs-06</p> <p>Obs-07</p>
8.7 Control of nonconforming outputs - QMS	Evidence of action on low attendance. Evidenced during the audit in Botany dept.	C
9.1 Monitoring, measurement, analysis and evaluation – General, Customer satisfaction, Analysis and evaluation – QMS 9.1 Monitoring, measurement, analysis and evaluation – General, Evaluation of compliance – EMS 9.1 Monitoring, measurement, analysis and evaluation of energy performance and the EnMS, General, Evaluation of compliance with legal requirements and other requirements - EnMS	<p>The organization has defined the Monitoring and measurement methodology in its Quality, Environment and Energy management system manuals dated 28.09.2023.</p> <p>Improvement in Faculty satisfaction level also mentioned in the report as evidenced in the same report.</p>	C



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ISO 9001-2015 (QMS), ISO 14001-2015 (EMS), ISO 50001-2018 (EnMS) Requirements	Comments	C/O/NCR
9.2 Internal audit	Conducted on 05.10.2023 and details verified and found ok.	C
9.3 Management review – General, Management review inputs, Management review outputs – QMS 9.3 Management review – EMS + EnMS	MRM conducted on 13.10.2023. The performance of all departments checked and found ok. Important issues and the needs & expectations of interested parties were reviewed. Reports of interaction with teachers, parents, and students were reviewed for student satisfaction. Adequate of present resources discussed and found ok. Various opportunities for improvement were reviewed.	C
10 Improvement – General, Nonconformity and corrective action, Continual improvement – QMS + EMS + EnMS	Based on the sample audit institution needs to be taken care of the following improvement areas as a planned way. 1. Institutional approach of lessons planning and record keeping is required to effectively plan and monitor the coverage the syllabus and take remedial steps for continual improvement. 2. Record of remedial classes need to be kept to effectively monitor and take remedial steps for continual improvement. 3. Records of class tests need to be maintained in department to effectively monitor and take remedial steps for continual improvement.	O

S. P. Miha.



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CLOSING MEETING

TOPICS FOR DISCUSSION	√
Thank the client for their hospitality, assistance and co-operation.	Yes
Confirm the assessment standard (e.g. ISO 9001:2015, ISO 14001:2015 & ISO 50001:2018)	Yes
Confirm any special scheme requirements e.g., HACCP	NA
Confirm scope of registration	Yes
Confirm statement of confidentiality, Information Security	Yes
Explain assessment was based on a sample.	Yes
Explain non-compliances., how the audit finding should be addressed based on the agreed process, Possible consequences of not adequately addressing the audit findings.	Yes
Invite the client to discuss the non-compliances.	N/A
Inform the client of recommendation for registration/ non-registration or continued registration, about complaints handling process.	Yes
Obtain client signature on reports.	Yes
Any related post Audit activities (e.g. implementation and review of corrective actions, addressing audit complaints, appeal process)	Yes
Explain and agree corrective action process.	Yes
Explain certificate issue process (initial assessment only)	Yes
Explain surveillance arrangements.	Yes
Confirm client has a copy of the current regulations.	Yes
Explain the rule for use of marks.(surveillance only)	Yes
Check use/non use of marks. (surveillance only)	Yes

S.P. Mitra