

ASSESSMENT REPORT (Quality Management System Audit)

7

Of

ISO 9001:2015

For

Sulochana Belhekar Samajik Va Bahu Uddeshiaya Shikshan Sanstha's

SANT DNYANESHWAR B. ED. COLLEGE

Client Identification No: EICPL-EG-910301 AUDIT DATE: 29.05.2023



EINZIGARTIG INTERNATIONAL CERTIFICATIONSPRIVATE LIMITED

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| AUDIT TYPE(conducted at client site/sites) | Certification stage 2 Scope Change | | S | Surveillance | □ F pecial Aud | | tification |
|--|---|-------------|---------|--------------------------------|--------------------|---------|-------------------|
| Audit Standards | ISO 9001 2015 | | | <u> </u> | | | |
| COMPANY NAME | SANT DNYANESH | WAR B. E | D. CC | LLEGE | | | |
| MAIN OFFICE ADDRESS | Bhanashiware, Tal: N | lewasa, E | ist. Al | hmednagar, | Maharasht | tra (41 | 4 609), India. |
| OTHER ADDRESS | Bhanashiware, Tal: N | lewasa, E | ist. Al | hmednagar, | Maharasht | tra (41 | 4 609), India. |
| Contact Information | Mob: 9860857050 Landline No: | | | MAIL: sd Web: www | ÷ | @red | iffmail.com |
| TOP MANAGEMENT | Dr, Rohidas Namdeo U | dmalle | REP | RESENTAT | IVE | Prii | ncipal |
| Top Management :02 | Staff | Worke | | | mp Emplo | yee | Total |
| | 10 | 05 | | 02 | | | 17 |
| Audit Objectives & Criteria | Objective To verify that the management system continuous to be implemented & conformed continued Conformity with certification / registration Requirement with applicable standard. Criteria Set of policies, Procedure and requirements Quality manual, Procedure Manual, System Procedure, customer specification & Requirements, applicable Statuary and regulatory requirements. | | | | | | |
| AUDIT SCOPE | Providing the Various Courses of Graduate Level for the Stream of B. Ed. | | | | | | |
| Accreditation | EGAC | | | | | | |
| Statutory/ Regulatory Requirements | SPPU Approval (22) NCTE CODE NO. A | | | | on ID: PU// | AN/BE | D/097/2008, AICTE |
| EA/NACE | Allocated code is ve (Yes/NO) | rified with | scope | 0 | EA CODE NACE CO | | |
| Audit Date | Audit Start Date: 29. Audit End Date : 29. | | | udit Start Tir udit End Tim | | А | udit Man/Day:02 |
| | AUD | IT TEAM | | | | | |
| LEAD AUDITOR | Mr. Jaywant Pagare | | | | | | |
| AUDITOR | Mr. Nilesh Magare | | | | | | |
| OBSERVER | Nil | | | | | | |
| TECHNICAL EXPERT | Nil | | | | | | |
| The auditor/Audit team don't have sel audit will be conducted on sampling b | | | aration | ı, which has | been conf | irmed | by client. The |

REPORT INNITIAL PART



Verification of previous Audit NC'c and Observations:-

| NC/OBS Number | Description | Verification and implementation of Correction and corrective action | Remark |
|------------------|-------------|---|--------|
| | No NCR's | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Conclusion | :-Approved | | |



PART 1 - ASSESSMENT COVERAGE

1.0 Overview:

(Describe in brief about organization and assessment execution, information relating to promoters, customers and services provided by client including the execution of the assessment plan and schedule and its changes if any)

Sant Dnyaneshwar B. Ed. College was established by Sulochana Belhekar Samajik Va Bahu Uddeshiya Shikshan Sanstha, Ahmednagar in 2008. Dr, Rohidas Namdeo Udmalle is the Principal of the institute. He is the Philanthropist and a Visionary person; he firmly believed that modern education had to have its roots in strong values. This underlying theme and legacy of Sant Dnyaneshwar B. Ed. College was continued and further strengthened by competent Staff.

Sant Dnyaneshwar B. Ed. College aims to provide meaningful and relevant education steeped in rich Indian Culture and heritage and rooted in universal religious philosophies of the world. At the same time, it strives to emphasize on both the liberal and professional aspects of higher education in the continuously evolving business World. Sant Dnyaneshwar B. Ed. College provides educational opportunities to all students to discover and disseminate knowledge in order to serve communities around the world.

Vision

- To Providing education and ample opportunities to the children and youth of India to excel globally in different profession.
- A premier institute as a dynamic entity contributing in Human Resource Department and solution provider to industry and society.

Mission

- 1. To prepare student for Globalizing Society.
- 2. Enable to accept the challenges in education fort 21st century.

3. To develop the younger generation for quality Research Scholars for shaping emerging Indian Society. Who have love and affinity towards their thought?

Philosophy

Enhancing Knowledge Building Careers Begins from the academia and continues through industry interactions, seminars, conferences, workshops and research. Approach that goes beyond a job to career the art of amalgamating the various talents and qualities in a person and directing it towards the goal of professional success

Values

- Encourage and expect honesty, freedom, transparency and the highest ethical standards.
- Believe in profession of teaching, respect to dignity of all persons, honoring the unique contributions provided by a diversity of perspectives and cultures.
- Seek for quality improvement by team work.
- Encourage and support innovation, best practices, imagination, creativity, excellence and vision.

Quality Objectives

- Strong Ties
- Encourage Research
- Communication Facilities
- Continuous Improvement



2.0 Outsourced Process if any: (Describe in brief and its control if applicable)

Since institute is involved in education sector no outsourced process is involved as per their scope

<u>3.0 General Compliance. Strengths and Weaknesses</u> <u>General Compliance</u>

Sant Dnyaneshwar B. Ed. College provided thorough evidences in timely manner during the assessment processes. Therefore the documented management system meets the requirements of ISO 9001:2015. Observations and non-conformities are listed in the report.

<u>Strengths</u>

Sant Dnyaneshwar B. Ed. College Has demonstrated a willingness to improve through the fast and thorough response to the observations raised during this assessment. Sant Dnyaneshwar B. Ed. College Has committed top management and well experienced and competent in the above scope.

<u>Weakness</u>

Horizontal deployment of management system



4.0 Area for Improvement (Observation/recommendation by Assessment Team)

- a. Library operation to be more precise
- b. Safety practices to be followed
- c. Housekeeping to be improved
- d. Safety practices to be followed
- e. Admin Activity to be more precise(ex. Leave Sanction)
- f. Multiple web platform is used (no linkage with each other)
- g. Appointment criteria matrix should be more specific and should not get compromise.



5.0 Non-Conformance Summary Report:

| Clauses REQUIREMENT | | MAJOR | MINOR | |
|---------------------|--|-------|-------|--|
| | | | | |
| 4.0 | Context Of The Organization | | | |
| 4.1 | Understanding The Organization And Its Context | | | |
| 4.2 | Understanding The Needs And Expectations Of Interested Parties | | | |
| 4.3 | Determining The Scope Of The Quality | | | |
| | Management System | | | |
| 4.4 | Quality Management System And Its Processes | | | |
| 5.0 | Leadership | | | |
| 5.1 | Leadership And Commitment | | | |
| 5.1.1 | General | | | |
| 5.1.2 | Customer Focus | | | |
| 5.2 | Policy | | | |
| 5.2.1 | Establishing The Quality Policy | | | |
| 5.2.2 | Communicating The Quality Policy | | | |
| 5.3 | Organizational Roles, Responsibilities And Authorities | | | |
| 6.0 | Planning | | | |
| 6.1 | Actions To Address Risks And Opportunities | | | |
| 6.2 | Quality Objectives And Planning To Achieve | | | |
| <u> </u> | Them | | | |
| 6.3 | Planning Of Changes | | | |
| 7.0 | Support | | | |
| 7.1 | Resources | | | |
| 7.1.1 | General | | | |
| 7.1.2 | People | | | |
| 7.1.3 | Infrastructure | | | |
| 7.1.4 | Environment For The Operation Of Processes | | | |
| 7.1.5 | Monitoring And Measuring Resources | | | |
| 7.1.5.1 | General | | | |
| 7.1.5.2 | Measurement Traceability | | | |
| 7.1.6 | Organizational Knowledge | | | |
| 7.2 | Competence | | | |
| 7.3 | Awareness | | | |
| 7.4 | Communication | | | |
| 7.5 | Documented Information | | | |
| 7.5.1 | General | | | |
| 7.5.2 | Creating And Updating | | | |
| 7.5.3 | Control of documented information | | | |
| 8.0 | | | | |
| 8.1 | Operation Operational planning and control | | | |
| | | | | |
| 8.2 | Requirements for products and services | | | |
| 8.2.1 | Customer communication | | | |
| 8.2.2 | Determining the requirements for products and services | | | |
| 8.2.3 | Review of the requirements for products and services | | | |
| 8.2.4 | Changes to requirements for products and services | | | |



| Clauses | REQUIREMENT | М | AJOR | MI | NOR |
|---------|---|---|------|----|-----|
| 8.3 | Design and development of products and services | | | | |
| 8.3.1 | General | | | | |
| 8.3.2 | Design and development planning. | | | | |
| 8.3.3 | Design and development inputs | | | | |
| 8.3.4 | Design and development controls | | | | |
| 8.3.5 | Design and development outputs | | | | |
| 8.3.6 | Design and development changes | | | | |
| 8.4 | Control of externally provided processes, products and services | | | | |
| 8.4.1 | General | | | | |
| 8.4.2 | Type and extent of control | | | 1 | |
| 8.4.3 | Information for external providers. | | | 1 | |
| 8.5 | Production and service provision | | | 1 | |
| 8.5.1 | Control of production and services | | | 1 | |
| | 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 | | | | |
| 8.7 | Control of nonconforming outputs | | | | |
| 9 | Performance evaluation. | | | | |
| 9.1 | Monitoring, measurement, analysis and evaluation | | | | |
| 9.1.1 | General | | | | |
| 9.1.2 | Customer satisfaction. | | | | |
| 9.1.3 | Analysis and evaluation. | | | | |
| 9.2 | Internal audit. | | | | |
| 9.3 | Management review. | | | | |
| 9.3.1 | General. | | | | |
| 9.3.2 | Management review inputs | | | | |
| 9.3.3 | Management review outputs. | | | | |
| 10 | Improvement | | | | |
| 10.1 | General | | | | |
| 10.2 | Nonconformity and corrective action | | | 00 | |
| 10.3 | Continual improvement. | | | | |
| | TOTAL NONCONORMANCES | | 00 | 00 | 00 |



PART 3 - CERTIFICATION PROCESS REQUIREMENT

The requirements identifies below refer to the EICPL Certification Manual as per ISO/IEC 17021:2011

6.0 QMS Effectiveness:

Sant Dnyaneshwar B. Ed. College has provided thorough evidences in timely manner and Quality Management System is adequately maintained however needs continuous

7.0 Continual Improvement: (Relating to improvement in product, process and Overall QMS of the client)

- Conduction of frequent skill development programs and testing of implementation by students in defined time slots of small practical tests.
- Reach to big industries with local companies for improve students Placement opportunities.

8.0 Customer Satisfaction:

Overall Student satisfaction index is 98%, which is appreciable however need to put continuous efforts in development to maintain improved Student satisfaction index.

9.0 Customer Complaints:

Sant Dnyaneshwar B.Ed. College has system of handing the

10.0 Specific Customer requirements if any:

All the Department teaching / Non-teaching staff are processed as per the AICTE /MSBTE regulations and all the concerns fulfill (Student/parent/regulatory) specifications/requirements etc. hence the student / Parents requirements are determined at contractual levels and process is monitored at various levels to meet the concerns requirements. Students Parents feedbacks are also collected at regular intervals to meet students requirements constantly and consistently.

11.0 Liability and financing

Insurance

Sant Dnyaneshwar B.Ed. College. adequately covers liability of itsoperations. Organization has covered its operational liability by covering the Fire/Theft Insurance.

12.0 Use of Quality Mark: (Application as per Trade Mark License Agreement)

Nil

<u>13.0 Follow Up Action Required by Client:</u>

There is one minor non-conformity reported during this assessment, and few observations reported in this assessment are listed in the report. Hence Sant Dnyaneshwar B.Ed. College. is recommended for issue of certificate.

14.0 EICPL Audit Team Recommendation: (Recommendation by Audit Team& NCR Copies if any)

Sant Dnyaneshwar B.Ed. College. has provided all the information for assessment in timely manner and no major failure of Quality Management System is noted in assessment. Documented Management system is effectively implemented and meets the requirements of International Standard ISO 9001:2015. EICPL Team has therefore recommended Sant Dnyaneshwar B.Ed. College. to issue certification to ISO 9001:2015 subjecting



15.0 Specific Recommendation for Surveillance Assessment:

Surveillance audit is Mandatory to validate the certificate of registration as per the ISO 17021:2015 and EGAC on or before March 2024

Next Due for Surveillance Audit is March 2024. Kindly contact EICPL Head Office for schedule and continued maintenance of certificate of registration, on below mentioned contact details,

Mobile: +91- 9096326666 Tel: +91-253-22321515 Email: info@eicplglobal.com,

operations@eicplglobal.com

16.0 Major changes reported in QMS: (Site, Scope, Top Management, Name, Address, Product, Process, Technological Change, and Statutory Compliance if any)

No Major changes reported in this assessment, which may impact, on the implemented QMS of Sant Dnyaneshwar B.Ed. College.

Yes, verified the findings of the previous assessment report by EICPL and there were only observations listed and no non-compliance reported. Observations have also been attended satisfactorily.



17.0 Surveillance Visit Schedule:

| | SURVEILLANCE VISIT | SCHEDULE | | | | |
|---|-----------------------|---|--------------|----------------|-------------|-------------|
| NAME/ LOCATION OFCOMPANY | SANT DNYANESHWAR | B. ED. COL | LEGE | Reference | ce No: EICP | L-EG-910301 |
| SYSTEM CLAUSES TO BE ASSESSEI SURVEILLANCE VISIT: | DAT EVERY | Mana Resp Satisf Audit: Conti Impro Corre | | ustomer mal | PL TMLA | |
| NUMBER OF PLANNED SURVEILLAN | CE VISITS: 02 Nos. | | | | | |
| S | urveillance Number: | 1st | 2nd | SA I | SA II | RC |
| 4 CONTEXT OF THE ORGANIZATION | | \checkmark | | | | |
| 4.1 UNDERSTANDING THE ORGANIZ | ATION AND ITS CONTEXT | | | | | |
| 4.2 UNDERSTANDING THE NEEDS AI EXPECTATIONS OF INTERESTED PA | | \checkmark | | | | |
| 4.3 DETERMINING THE SCOPE OF TH QUALITY MANAGEMENT SYSTEM | | \checkmark | \checkmark | | | |
| 4.4 QUALITY MANAGEMENT SYSTEM | AND ITS PROCESSES | | | | | |
| 5LEADERSHIP | | | | | | |
| 5.1 LEADERSHIP AND COMMITMENT | | | \checkmark | | | |
| 5.1.1 GENERAL | | | \checkmark | | | |
| 5.1.2 CUSTOMER FOCUS | | | \checkmark | | | |
| 5.2 POLICY | | | \checkmark | | | |
| 5.21 ESTABLISHING THE QUALITY PO | DLICY | | | | | |
| 5.2.2 COMMUNICATING THE QUALITY | Y POLICY | | \checkmark | | | |
| 5.3 ORGANIZATIONAL ROLES, RESPONSIBILITIES AND AUTHORITIE | S | V | \checkmark | | | |
| 6 PLANNING | | | \checkmark | | | |
| 6.1 ACTIONS TO ADDRESS RISKS AN OPPORTUNITIES | | \checkmark | \checkmark | | | |
| 6.2 QUALITY OBJECTIVES AND PLAN | NING TO ACHIEVE THEM | | | | | |
| 6.3 PLANNING OF CHANGES | | | | | | |
| 7 SUPPORT | | | V | | | |
| 7.1 RESOURCES | | | | | | |
| 7.1.1 GENERAL | | | \checkmark | | | |
| 7.1.2 PEOPLE | | | | | | |
| 7.1.3 INFRASTRUCTURE | | | \checkmark | | | |
| 7.1.4 ENVIRONMENT FOR THE OPER OF PROCESSES | | √ | √ | | | |
| 7.1.5 MONITORING AND MEASURING RESOURCES | | V | √ | | | |
| 7.1.6 ORGANIZATIONAL KNOWLEDG | E | | 1 | | | |
| 7.2 COMPETENCE | | | <u>الا</u> | | | |
| 7.3 AWARNESS | | | V | | | |
| 7.4 COMMUNICATION | | | ν | | | _ |
| 7.5 DOCUMENTED INFORMATION | | | 1 | | | - |
| 7.5.1 GENERAL | | | V | | | |
| 7.5.2 CREATING AND UPDATING | | | 1 | | | |
| 7.5.3 Control of documented information | 1 | | <u>الا</u> | | | |
| 8 Operation | | | V | | | |
| 8.1 Operational planning and control | | 1 | | | | |
| 8.2 Requirements for products and serv | ICES | | V | | | |
| 8.2.1 Customer communication | | | \checkmark | | | |



| Surveillance Number: | 1st | 2nd | SA I | SA II | RC |
|--|--------------|--------------|------|-------|----|
| .2.2 Determining the requirements for products and services | | V | | | |
| 8.2.3 Review of the requirements for products and services | \checkmark | V | | | |
| 8.2.4 Changes to requirements for products and services | | | | | |
| 8.3 Design and development of products and | | | | | |
| services 8.3.1 General | 1 | 1 | | | |
| | <u>الا</u> | N | | | |
| 8.3.2 Design and development planning. | N | | | | |
| 8.3.3 Design and development inputs | | | | | |
| 8.3.4 Design and development controls | \checkmark | \checkmark | | | |
| 8.3.5 Design and development outputs | | \checkmark | | | |
| 8.3.6 Design and development changes | | | | | |
| 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. | | | | | |
| 8.5 Production and service provision | | | | | |
| 8.5.1 Control of production and services Provision. | | | | | |
| 8.5.2 Identification and traceability | | \checkmark | | | |
| 8.5.3 Property belonging to customers or external providers | V | N | | | |
| 8.5.4 Preservation | | | | | |
| 8.5.5 Post-delivery activities. | | √ | | | |
| 8.5.6 Control of changes | | √ | | | |
| 8.6 Release of products and services | √ | √ | | | |
| 8.7 Control of nonconforming outputs | √ | √ | | | |
| . | | | | | |
| 9Performance evaluation.9.1 Monitoring, measurement, analysis and | $\frac{}{}$ | √ √ | | | |
| evaluation | 1 | 1 | | | |
| 9.1.1 General | <u>√</u> | <u>ار</u> | | | |
| 9.1.2 Customer satisfaction. | <u></u> | √ | | | |
| 9.1.3 Analysis and evaluation. | <u></u> | √ | | | |
| 9.2 Internal audit. | N | √ | | | |
| 9.3 Management review. | | √ | | _ | _ |
| 9.3.1 General. | √ | √ | | _ | _ |
| 9.3.2 Management review inputs | √ | √ | | | |
| 9.3.3 Management review outputs. | √ | √ | | | |
| 10 Improvement | √ | √ | | | |
| 10.1 General | √ | √ | | | |
| 10.2 Nonconformity and corrective action | \checkmark | \checkmark | | | |
| 10.3Continual improvement. | | | | | |
| Number Of Man-Days Allocated Per Visit | 01 | 01 | | | |
| Number Of Sites | 01 | 01 | | | |
| COMMENTS: | | | • | | |

NAME: Mr. Jaywant Pagare

DATE: 29/05/2023



PROCESS RISK ASSESSMENT & COMPLIANCE REPORT

| Sr. No | Processes/ Activity | Risk Involved | Severity | Risk Management/ Risk Mitigation Tools | Monitoring / Tracking Techniques | Remarks |
|-----------|------------------------|---|----------|---|--|---------|
| 1 | Staff | Language Limit | Medium | Arrange Training for Skill Development | MRM | |
| 2 | Library | Un-availability of proper sorted labeled rack | High | Follow 5'S | MRM | |
| 3 | House keeping | Washroom water leakage | Medium | Plumbing | MRM | |



<u>CONCLUSION</u>

Statement of Conclusion

Based on samples of records verified and feedback obtained from interviewed Managers and Staff members at **Bhanashiware, Tal: Newasa, Dist. Ahmednagar, Maharashtra (414 609), India.** During the stage 2 audit it appears that <u>SANT DNYANESHWAR B. ED. COLLEGE</u> continues to comply with the requirements of ISO 9001 2015. As there was one minor non-conformances identified during the audit, <u>SANT DNYANESHWAR B. ED. COLLEGE</u> is recommended for Certification to ISO 9001 2015. The auditor would like to thank all the Staff members & Dr. Kalkotwar, who participated in the audit for their assistance and cooperation. It was a pleasure working with you during the audit.

DISCLAIMER

Some issues, non-compliances or required improvements within the organization may not have been identified in this report, due to the sampling size and time available during the audit. The organization's management is responsible for implementing a surveillance system (based on internal audits) to identify non-conformances/continuous improvement opportunities and to take the necessary controls to ensure the quality management system implemented is effective and meets organizational and regulatory requirements.

CONFIDENTIALITY STATEMENT

EICPL, its employees, auditors and contractors, shall keep all information relating to your organization collected during this audit confidential, and shall not disclose any such information to any third party, except that as required by legislation or relevant accreditation bodies. EICPL, its employees, auditors and contractors and accreditation bodies have signed confidentiality agreements and will only receive confidential information as per the requirement of the standards being audited.

Recommendation

According to data included in mentioned report, our certification committee SYSTEM CERTIFICATE

| ☐ Issue of Certificate ☐ Making Scope Change ☐ | Continue to use certificate Renewal |
|--|--|
| Cancel the certificate Suspend the certificate | Continue to suspend position D Making |
| Address Change | |
| After closing the discrepancies appropriately IMPLE | MENTATION OF FOLLOW UP AUDIT |
| After closing the discrepancies appropriately GIVING | G CERTIFICATE WITHOUT FOLOW UP AUDIT |
| After closing the discrepancies appropriately CONTL | NUE TO USE CERTIFICATE WITHOUT |
| FOLLOW UP AUDIT | |
| Deadline for next audit & Notes; March 2024 | |
| Lead Auditor/Auditor :- Mr. Jaywant Pagare | CEO/ Representative :- Dr, Rohidas Namdeo Udmalle |
| | |
| Signature & stamp :- | Signature & stamp :- |
| STUNAL CERTIS | INESHWAR |
| | Contra Co |
| All and a state | (AP)W05389/ |
| A A A A A A A A A A A A A A A A A A A | an to contract the second s |
| | |
| Date :- 29/05/2023 | Date :- 30/05/2023 |
| | |