



Lloyd's
Register

Migration, Surveillance 4

Report for:

PT Molindo Raya Industrial

LR reference:	JKT6015008 / 3643680
Assessment dates:	27-May-2021 - 28-May-2021
Reporting date:	01-June-2021
Client address:	Jl. Sumber Waras No. 255, Lawang, Malang , ID
Assessment criteria:	ISO 45001:2018, OHSAS 18001:2007
Assessment team:	Laksono Purnomo Sugeng Hartono
LR Client Facing Office:	JKT Indonesia OU

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Attachments:

JKT6015008_APP_OHS_SV4+NST_LPZSHS_May 2021.doc
ISO 45001 Migration Checklist_May 2021.docx

This report was presented to and accepted by:

Name: Ms. Erlis Sartini
Job title: MR

01. Executive report

Assessment outcome:

Based on the assessment outcome the Assessment Team recommends the ISO 45001:2018 certification of PT Molindo Raya Industrial for the agreed scope.

This visit was to assess the compliance of the management system of PT Molindo Raya Industrial against OHSAS 18001:2007 as defined in the audit planning documentation. The outcome of the visit is recorded below.

No major non conformance was raised during assessment therefore company could to certify ISO 45001:2015 with current scope.

The Assessment Team Leader confirms the contractual arrangements for ISO 45001:2018, OHSAS 18001:2007 are correct. This includes any changes required as a result of the outcome of the Stage 1 visit (including changes to the scope of assessment, duration of the Stage 2 visit, and duration of subsequent surveillance visits).

Continual improvement:

SHE Programs Y2021



Areas for senior management attention:

- Legal and other requirement compliance
- Competent personnel (certified specialized skill)
- Understand the needs and expectations of workers
- OHS Policy (commitment commitment to consultation and participation of workers)
- Management review inputs and outputs
- Operational control (Production and Laboratory)

02. Assessment findings

Where scheme requirement differs to the standard definition below, the scheme definition will take preference

Major Nonconformity

The absence of, or the failure to implement and maintain, one or more management system elements, or a situation which would, on the basis of the available objective evidence, raise significant doubt of the management to achieve: The policy, objectives or public commitments of the organisation, compliance with the applicable regulatory requirements, conformance to applicable customer requirements, conformance with the audit criteria deliverables.

Minor Nonconformity

A finding indicative of a weakness in the implemented and maintained system, which has not significantly impacted on the capability of the management system or put at risk the system deliverables, but needs to be addressed to assure the future capability of the system.

Reference number	3643680_JKALPZ01	Assessment Criteria (Clause)	ISO 45001:2018 (4.2)
Grade	Minor NC	Issue Date	28-May-2021
Status	New	Process / Aspect	Understanding the needs and expectations of workers
Location(s)	Jl. Sumber Waras No. 255,Malang,ID		
Statement of Non Conformity	Understanding the needs and expectations of workers related to OHSMS have not been identified as further reference for organization plan of risks and opportunities to ensure relevant action(s) taken to eliminate the potential risk(s) and to improvement programs as necessary based on those input(s).		
Requirement	ISO 45001:2018 Clause 4.2		
Evidence	Understanding the needs and expectations of interested parties and workers up date on 30 April 2021.		
Proposed correction, corrective action and timescales	Identify the needs and expectations of workers related to OHSMS. Time : End of September, 2021		
Correction	Determine media to understanding the needs and expectations of workers related to OHSMS and implement it		
Root Cause analysis	Initially ISO 45001:2018 implementation		
Corrective action			
LR has reviewed and verified the implementation of actions taken.	Date of closure		

Reference number	3643680_JKALPZ02	Assessment Criteria (Clause)	ISO 45001:2018 (5.2)
Grade	Minor NC	Issue Date	28-May-2021
Status	New	Process / Aspect	OHS Policy
Location(s)	Jl. Sumber Waras No. 255,Malang,ID		
Statement of Non Conformity	OHS policy has not include a commitment to consultation and participation of workers, and, where they exist, workers' representatives to ensure Top Management commitment as required by ISO 45001:2018.		
Requirement	ISO 45001:2018 Clause 5.2		
Evidence	OHS Policy on 20 August 2019.		
Proposed correction, corrective action and timescales	Revise OHS policy. Time : End of August, 2021		
Correction	Review existing policy and adding points required by ISO 45001: 2018, include commitment to consultation and participation of workers.		
Root Cause analysis	Initially ISO 45001:2018 implementation		
Corrective action			
LR has reviewed and verified the implementation of actions taken.	Date of closure		

Reference number	3643680_JKALPZ03	Assessment Criteria (Clause)	ISO 45001:2018 (6.1.1, 9.1.2)
Grade	Minor NC	Issue Date	28-May-2021
Status	New	Process / Aspect	Legal and other requirements
Location(s)	Jl. Sumber Waras No. 255,Malang,ID		
Statement of Non Conformity	<p>1. Refers to latest evaluation of compliance noted that relevant regulations could not be comply yet such as :</p> <ul style="list-style-type: none"> - Permenaker No.5 Year 2018 related to competent personnel (Industrial Hygiene Expert /Ahli K3 Lingkungan Kerja) and workplace monitoring and measurement related to Biological, Ergonomic, Psychological factors - Kepmenaker No.187 Year 1999 related to competent personnel (Chemical Safety Officer/Petugas K3 Kimia) - Permenaker No.12 Year 2015 and Permenaker No.33 Year 2015 related to competent personnel Electrical Safety Expert (Ahli K3 Listrik) - Kepmenaker No.186 Year 1999 related competent personnel for Class A, C and D. Noted that Class B is certified for 4 personnel (valid certified until 19-10-2021) <p>2. Legal requirements and other requirements were not take into account by organization when determining the risks and opportunities for the OH&S management system and its intended outcomes that need to be addressed (as samples above) to determine the potential risk(s) and actions plan to be taken to eliminate those potential risk(s).</p>		
Requirement	ISO 45001:2018 Clause 6.1.1,9.1.2		
Evidence	<p>1. Legal and other requirement evaluation of compliance period 30 April 2021.</p> <p>2. Risk And Opportunity Analysis up date on 30 April 2021 by sampling SHE Department</p>		
Proposed correction, corrective action and timescales	<p>1. Comply to relevant regulations based on priority scale. Time : End of November, 2021</p> <p>2. Revise Risks and Opportunities based on Legal requirements and other requirements. Time : End of August, 2021</p>		



Correction	1. Determine the priority scale based on risk assessment and contact third party regarding personnel competent certification 2. Review Legal requirements and other requirements and updated to Risks and Opportunities form.	
Root Cause analysis	Risk assessment of relevant regulation has not been identified yet.	
Corrective action		
LR has reviewed and verified the implementation of actions taken.	Date of closure	



Reference number	3643680_JKALPZ04	Assessment Criteria (Clause)	ISO 45001:2018 (9.3)
Grade	Minor NC	Issue Date	28-May-2021
Status	New	Process / Aspect	Management Review
Location(s)	Jl. Sumber Waras No. 255,Malang,ID		
Statement of Non Conformity	Management review inputs and outputs were not fully provided as required ISO 45001:2018 e.g. organization planning of risks and opportunities and consultation and participation of workers.		
Requirement	ISO 45001:2018 Clause 9.3		
Evidence	Minutes of Meeting MR on 15 January 2021		
Proposed correction, corrective action and timescales	Complete input of management review by adding organization planning of risks and opportunities and consultation and participation of worker. Time : End of August, 2021		
Correction	Conduct management review with complete review inputs and outputs as required ISO 45001:2018.		
Root Cause analysis	Initially ISO 45001:2018 implementation		
Corrective action			
LR has reviewed and verified the implementation of actions taken.	Date of closure		

Reference number	3643680_JKALPZ05	Assessment Criteria (Clause)	ISO 45001:2018 (6.1.2, 8.1.1)
Grade	Minor NC	Issue Date	28-May-2021
Status	New	Process / Aspect	Production and Laboratory
Location(s)	Jl. Sumber Waras No. 255,Malang,ID		
Statement of Non Conformity	<p>Production</p> <ol style="list-style-type: none"> 1. Unsafe condition could be observed for the water pipe installation (in corroded condition) with potential leakage at Distillation processes area. 2. Potential fire hazard had not been sufficiently identified at Distillation processes i.e. flammable material leakage/release (Liquid or vapour alcohol) in the hazard identification and risk assessment as part prevention of fire accident. Noted that non managerial personnel involvement had not been evidenced for the risk assessment as internal requirement. 3. Gas detector monitoring and measurement had been conducted and reported at Distillation Plant and Alcohol storage. However the inspection guidance had not been sufficiently provided related to period, method, competent personnel and measurement equipment accuracy as further implementation reference. <p>Laboratory</p> <p>Fume hood inspection and maintenance guidance had not been officially provided as further implementation reference to ensure the performance and safety availability during usage e.g. inspection period, method, parameter (e.g. air velocity and lighting intensity) and competent personnel requirements.</p>		
Requirement	ISO 45001:2018 Clause 6.1.2,8.1		
Evidence	<p>Production</p> <ol style="list-style-type: none"> 1. Site observation 2. HIRADC up date on May 2021 3. Document No.SHE/P-01 Laboratory Fume hood inspection guidance had not been officially provided as further implementation reference to ensure the performance and safety availability during usage e.g. inspection period, method, parameter(s) and competent 		



Evidence	personnel requirements.	
Proposed correction, corrective action and timescales	Laboratory 1. Site observation and inspection record	
	Production : 1. Provide water pipe maintenance at distillation area. Time : End of August, 2021 2. Revise HIRADC table with non managerial personnel involvement . Time : End of August, 2021 3. Implement inspection guidance (method, competent personnel and measurement equipment accuracy) related to gas detector monitoring and measurement. Time : End of August, 2021 Laboratory : Provide fume hood inspection and maintenance guidance. Time : End of July, 2021	
Correction	Production : 1. Repair water pipe installation in corroded condition and monitor regularly 2. Identify potential fire hazard at distillation area with non managerial personnel involvement 3. Provide gas detector monitoring and measurement based on inspection guidance Laboratory : Looking for references to inspect and maintain fume hood, determine method, period and implement the Fume hood inspection and maintenance	
Root Cause analysis	Production : 1. Lack awareness about pipe water monitoring 2. Lack awareness about potential risk and initially ISO 45001:2018 implementation 3. Lack awareness about gas detector monitoring and measurement Laboratory : Lack of awareness about fume hood inspection and maintenance	
Corrective action		
LR has reviewed and verified the implementation of actions taken.	Date of closure	



03. Assessment summary

Visit generic objective:

This was a Migration, Surveillance 4 visit, conducted against objectives previously notified to the client. The objectives of the next visit, including any applicable visit specific objective (theme / focus), are confirmed in the audit plan attached to this report.

Client attendees at the opening and closing meeting:

Assessment purpose, method and results were communicated during opening and closing meeting who attend by Top Management, MR, Legal Representative, Health Representative, Worker Representative and respective function levels in the organization.

Opening meeting : 09.00 - 09.30 AM

Closing meeting : 03.00 - 04.00 PM

Top Management : Ananto Wardono

MR : Erlies S

Legal Representative : Umar

Health Representative : Sofyan Hadi

Worker Representative : Martono, Listyo

Visit specific objective:

Compliance assessment.

Introduction:

The surveillance and migration assessment had been conducted to verify the effectiveness of OHSMS refers to ISO 45001:2018 requirements. Due to COVID-19 pandemic the assessment had been conducted through remote audit by using Google Meet, phone and email.

Assessment of:	Management Elements	Assessor:	Laksono Purnomo
Auditee(s):	Ananto Wardono ; Umar Erlis Sartini ; Kartika Eko Suminto ; Sopian Hadi		

Audit trails and sources of evidence:

Discussion of all outstanding issues from previous visits

Finding log

Management elements

Context of the organization

- Internal and external issues ; SWOT ; **PPE awareness** ; **Personnel competence** ; **Rotating equipment cover** ; PAK (Production) ; Hydrant ; Ergonomic ; Signage
- Needs and expectations of interested parties and workers ; external parties ; Man Power Department (Disnaker) - personnel competence ; COVID-19 Prevention
- OHSMS scope : Manufacture of Ethanol
- Processes and its interactions ; Organization structure

Leadership, Worker participation and consultation, communication

- Top Management Commitment ; Daily Safety Meeting ; Proactive Safety Management (Shift change over) ; Weekly Production Meeting (Zoom Meeting Online) ; Focus team empower (risk assessment and risk assessment) ; Safety Behaviour ; 3 Topic Top Risks (One Point Lesson)
- Leadership and commitment ; OHS objectives, Strategic direction, Continual improvement, Promote OHS Culture
- ISO 45001:2018 Awareness and Internal Auditor ; Attendance List (Internal Auditor on 19 May 2021) ; Attendance List (Awareness on 27-28 April 2021) ; by PT.Triger Dinamika Training and Consulting
- OHS Policy (20 August 2019) ; commitment to fulfil legal requirements and other requirements ; commitment to eliminate hazards and reduce OH&S risks ; commitment to continual improvement of the OH&S management system ; commitment to consultation and participation of workers ; be communicated within the organization ; be available to interested parties, as appropriate

Organizational roles, responsibilities and authorities ; Job description ; Organization structure ; **by sampling production and maintenance operator**

- Communication, consultation and participation of workers ; OHS Committee/P2K3 ; emphasize the consultation of non-managerial workers on the following by sampling establishing the OH&S policy, determining how to fulfil legal requirements and other requirements, determining the mechanisms for their consultation and participation, identifying hazards and assessing risks and opportunities, investigating incidents and non-conformities and determining corrective actions ; Document Corporate Manual 4.1 ; Communication Matrix (MR,Daily Safety Briefing, Phone, Email) ; Communication, Participation and Consultation Matrix ; Incident investigation (Document No.SHE/P-03) ; HIRADC (Document No.SHE/P-04) ; P2K3LH (registered 2012 by Disnaker ; proposed on 30-04-2021) ; Ahli K3 Umum/Kimia ; Non Managerial (by sampling for staff and operator - K3LH by Joko Sutrisno) ; Discussion with worker representative (non managerial - by sampling GA Dept) ; Laporan P2K3LH (Triwulan I

Y2021) ; Internal P2K3LH Meeting by online (27-01-2021 ; 21-04-2021)

Planning

Action addresses of risks and opportunities include planning actions

Up date on 30 April 2021 ; Risk And Opportunity Analysis (by Department)

Document No.RNI/P-11 Risk Analysis ; Significant - Form RNI/F-11/02 (Corrective Action)

By sampling HSE Dept - based on internal/external issues such as competent personnel ; PPE awareness ; COVID-19 pandemic

By sampling QC - based on internal/external issues, HIRADC such as sample test, electrical shocking, sampling activity at plant

Hazard identification and assessment of risks and opportunities

By sampling at production and laboratory (see site observation report)

Determination of legal requirements and other requirements include evaluation of compliance

Up date 30 April 2021

Kepmenaker No.187 Year 1999 ; Potensi Bahaya Kimia Besar ; HIRADC

Permenaker No.37 Year 2016 ; Daftar Izin Bejana Tekan/Tangki Timbun ; By sampling Tank No.T-1005, T-1008, T-1009 (31-05-2021) ; T 5021 A, T 5021 B (23-09-2021) ; Inspection Report by sampling T-1005 (31-05-2019) by Pengawas Ketenagakerjaan Spesialis K3 PUBT

Permenaker No.5 Year 2018

Permenaker No.8 Year 2020 re. K3 Pesawat Angkat dan Angkut

SE MENPERIN No.8 Year 2020

HK.01.07

Objectives, Targets and Programs

- Document No.RNI/P-11 Risk Analysis

- Monitoring Report Period Q1 Y2021

- Zero Accident and Work Related Illness

- OHS Performance Period November 2020 - April 2021 ; Working Hours 19.197.641 ; Zero Accident

- MCU Recapitulation Report Y2020 ; All personnel ; Zero Work Related Illness ; Follow Up Actions (consultation medical) ; Surat Keterangan by PRODIA (8-11-2020)

Competence and awareness

Competence Development Programs Y2021

Certified Personnel ; Chemical Safety Expert (Ahli K3 Kimia) ; Forklift Operator License ; Loader Operator License ; Fire Fighter Class

Awareness ISO 45001:2018 Training

COVID-19 Prevention Socialization

Emergency preparedness and response

Emergency Drill Report ; 8 October 2020 ; Fire Fighting ; First Aid ; Evacuation

Emergency Facilities Inspection Period May 2021 ; Fire Extinguisher (Checklist Pengecekan APAR), Hydrant (Daftar Pemeriksaan Hydrant), Fire Alarm (Checklist Pengecekan Alarm Bahaya)

External Providers

By sampling contractor for PT.Tangguh Tiara Permai (Period 1-10-2020 to 31-12-2020) ; OHS aspect

Document No.PUR/S-03/01 Point E. Aspek K3 by sampling contractor SHE (50%) - PPE, Waste, Patrol findings

Performance evaluation

Workplace monitoring and measurement

Report Period Semester I Y2021 ; 29 April 2021

By sampling by Envi Lab at Laboratory for chemical exposure (workplace indoor air quality), temperature/humidity and noise exposure

By sampling by internal at Boiler, Storage tank, compressor MIG, Separator for noise level

By sampling by internal for illumination at production areas

Internal Audit

Internal Audit Programs ; 21 - 24 May 2021 ; Production, Utility, K3LH ; Checklist Audit

Audit Finding Summary ; 12 Findings (1 Minor NC and 11 observation)

Corrective Actions Plan

Management Review

Minutes of Meeting ; Attendance List ; 15 January 2021

Improvement

Continual Improvement Programs Y2021 ; Program Kerja K3 Tahun 2021 ; Emergency Responsible Plan ; Safety Device Provision ; Zero Accident Award ; Transporter Inspection ; Monthly HSE Inspection ; External Report ; Safety signage ; COVID-19 Prevention

Incident Investigation, Non Conformance and Corrective actions ; Internal Audit Report

Evaluation and conclusions:

Discussion of all outstanding issues from previous visits

- No non conformance finding was raised from previous assessment.

Management elements

Context of the organization

- Internal/external issues, needs and expectations of interested parties and workers have been identified and evaluated on 30 April 2021.

- OHSMS scope is remain same as previous assessment.

- No significant change (Management of Change) is reported since previous assessment.

Leadership, Worker participation and consultation, communication

- Top management focus programs Y2021 is planned to improve the organization OHS-MS i.e. One Point Lesson at respective department to eliminate potential risks for their Top 3 Risk Assessment result as part prevention of accident and work related illness commitment.

- ISO 45001:2018 Awareness and Internal Auditor had been provided by external provider to respective personnel.

- OHS Policy had not been changed since last assessment.

- Organizational roles, responsibilities and authorities were managed refers to organization structure and job description.

- Worker participation, consultation and communication have been conducted through some mediums.

- In general OHSMS has been planned, implemented, maintained and improved by organization as required by ISO 45001:2018.

Planning

Action addresses of risks and opportunities include evaluation of compliance have been provided refers to context of the organization, hazard identification risk assessment and compliance obligations as described by internal procedure.

Hazard identification and assessment of risks and opportunities have been provided at respective areas.

Determination of legal requirements and other requirements include evaluation of compliance have been up dated in regular bases. Some regulations were identified to be comply for next focus.

Objectives, targets and programs were reported in monthly bases with generally targets could be achieved for the objectives relates to zero accident and work related illness. It has been determined by corporate with deployment to respective departments.

Competence and awareness

OHSMS awareness training and socialization have been conducted as internal planning.

Competence development programs Y2021 have been planned.

Competence of specialized skills need to be improved as required regulations.

Emergency preparedness and response

Emergency drill had been conducted and reported as internal planning.

Emergency facilities inspection had been conducted and reported as internal planning.

External Providers

Performance evaluation had been conducted for external provider refers to QHSE aspect in annual bases.

Performance evaluation

Workplace monitoring and measurement had been conducted in six monthly bases for physical and chemical factors at respective areas as internal planning. Generally results were below/within threshold as determined by regulations.

Internal audit had been conducted at production, utility and HSE department refers to ISO 45001;2018 requirements. Internal audit had been planning for twice annually.

Management review had been conducted on January 2021 and attend by Top Management and respective function level in the organization.

Improvement

Continual improvement programs were planned and implemented during Y2021 as internal planning.

No incident investigation was provided due to zero accident and work related illness performance since last assessment.

Non Conformance and Corrective actions were raised from internal audit report.

Areas for attention:**Opportunity For Improvement**

- Health Ministry could be identified as part organization needs and expectations of interested parties as further OHSMS reference.

- Short and long term programs could be planned and determined as further implementation reference for prevention of accident and work related illness corporate programs such as One Point Lesson, Behaviour Base Safety and Safety Culture.

- Relevant regulations could be identified and evaluated to ensure the compliance level related to COVID-19 Prevention and lifting equipment such as :
Keputusan Menteri Kesehatan RI No.HK.01.07/MENKES/328/2020 (temperature check for $\geq 37,3^{\circ}\text{C}$ instead of $\geq 37,5^{\circ}\text{C}$ and mask treatment prior disposal)
Surat Edaran Menteri Perindustrian No.8 Year 2020 (SIINas Portal)
Peraturan Menteri Tenaga Kerja RI No.8 Year 2020 re. K3 Pesawat Angkat dan Angkut (lifting equipment i.e. hand pallet/lift).
- The results of the assessment of risks and opportunities could be considered as part of company objectives and programs to ensure the corrective actions taken to eliminate to potential risk or to provide the improvement actions i.e. for Significant risk/opportunity level refers to Document No.RNI/P-11 Risk Analysis with current follow up by corrective action through Form RNI/F-11/02.
- Internal audit had been conducted refers to ISO 45001:2018 requirements at production, utility and HSE Department. Noted that other areas could be conducted next period as determined in internal audit program planning Y2021.

Assessment of:	Production and laboratory	Assessor:	Laksono Purnomo
Auditee(s):	Medhy Andang ; Danang Ana ; Bambang Umar ; Kartika ; Erlis Sartini		

Audit trails and sources of evidence:

Hazard identification, risk and opportunity assessment

Production

up date on May 2021

by sampling Daily Processes DCS (distillation processes) ; working at height, lightning, lift, fire (gas detector) - Table Monitoring Flammable Gas (02-03-2020) ; explosion proof for cable installation (Engineering Improvement Programs Period 7-04-2021 to July 2021) ; Lampu mati (tidak diterima) - control determination (emergency lamp at control room and evacuation route) ; Lighting (working areas) ; Fire by falling tree(s)

by sampling storage tank ; Flammable area restriction signage

Gas detector ; Table Monitoring Flammable Gas at Production, Storage Tank (14-04-2021 ; 29-04-2021 ; 05-05-2021 ; 21-05-2021) ; Distillation Plant (21-05-2021 ; 23-04-2021 ; 10-05-2021 ; 24-05-2021) ; Document No.SHE/P-01 ; 2 units equipments

Laboratory

up date on 30-04-2021

by sampling fire hazard ; chemical exposure (hazardous chemical - Sulphuric Acid, Ethanol) ; fume hood - ISPA (IK

QCT/IK-01/01 - PPE, uniform, method ; explosion proof lamp ; chemical exposure (by Envi Lab period on 13-04-2021)

Site observation

- Prevention of accident and work related illness

Production

By picture at Distillation Processes, PPE awareness (mandatory and specific PPE), noise exposure mapping (Ear muffs), flammable signage, pressure vessel protection, control room, safety signage, fire hazard signage (at restricted area storage tank) ; water piping installation

- Emergency facility ; evacuation route ; emergency lamp ; fire extinguisher ; assembly point ; hydrant (spray water)
- COVID-19 Prevention ; hand washing bay ; socialization

Laboratory

Pressure vessel protection

PPE signage ; Evacuation route ; Wet Laboratory ; Emergency shower ; Emergency lamp

Change shifts

Safety briefing (serah terima - manufacturing report) ; Shift II on 24-05-2021 (HSE issue(s)) ; lighting system on the night time ; emergency water pump ; red zone production ; safety lines ; PPE

Evaluation and conclusions:**Production**

- Hazard identification risk and opportunity assessment have been reviewed at respective processes and activities.
- HSE issue was recorded during change shift through manufacture report.
- Gas detector monitoring had been conducted at respective production areas e.g. Distillation Plant and Alcohol storage.
- Emergency facilities were provided at respective points.
- In general the prevention of accident and work related illness could be maintained as internal planning at respective processes areas.

Laboratory

- Hazard identification risk and opportunity assessment have been reviewed at respective processes in the laboratory.
- Workplace monitoring and measurement had been conducted in regular bases with sampling chemical exposure.
- Emergency facilities were provided at respective points.
- In general the prevention of accident and work related illness could be maintained as internal planning at respective processes areas.

Areas for attention:**Opportunity For Improvement**

Absorber/scrubber could be considered as additional fume treatment prior disposal as part commitment prevention of environmental.

Assessment of:	Utilities ; Documented Information	Assessor:	Sugeng Hartono
Auditee(s):	Mr. Sholik A Ms. Heni S Ms. Kartika		

Audit trails and sources of evidence:

Area of audits :

Utilities : (- Cooling system, - Boiler, Generator, Coal stock pile, Crusher)

Including the internal and external inspection report

Documented information

Trails and evidence

Incident statistic at Utility

Verification on boiler pressure gage March 2021

Daily Boiler inspection and monitoring (Pressure, temp, noise)

Objective and Program at Utility

Steam Engine Operator OHS License.

Licence OHS Operator in lifting equipment

Dokumen hasil pemeriksaan instalasi listrik (Electrical installation inspection result documents)

Weekly meeting, safety briefing (daily), tool box meeting (monthly)

Documented Information

List of document

Sample Document revision Utility : Pengoperasian Tangki MGF Demin Plan

Evaluation and conclusions:

Hazard identification:

- Hazard identification and assessment of risks and opportunities had been updated

Legal compliance

- Machine and person who operate machine had a licence.

Objective

- The department already had their own objective.

Awareness, Role and responsibility

- from interview, it is conclude the person in charge had been having good awareness and clear with role and responsibility

Competency

- The person who operate the machine already well trained. Proven by SIO.

Internal communication

- Communication such as they called weekly meeting, safety briefing in daily, toolbox meeting with OHS



department had been conducted.

Operation control

- The department already have set of instructions to control most of risky operation.

Incident :

- None of incident in any categories in last 6 months

Document control;

- It is found the the documents had been in good control.

Areas for attention:

None

04. Next visit details

Theme(s) for Next Visit

Focus visit

Standard(s) / Scheme(s)	ISO 45001:2018	Visit type		Focus Visit	
Audit days	2.00 DAY	Due date		August, 2021	
Team	LPZ				
Site		Audit days	Delivery Method	Remote Effort	Activity codes
Jl. Sumber Waras No. 255,Malang,ID		2.00 DAY	Remote	2.0 DAY	045001,066503

05. Appendix

1. Audit Programme/Plan

Visit Type	CR	SV1	SV2	SV3	SV4+ NST	SV5	CR Visit
Due Date	Feb 2019	Aug /2019	Feb 2020	Aug 2020	Feb 2021	Aug 2021	Feb 2022
Start Date	27 Jan 2019	14 Nov 2019	14 May 2020	19 Nov 2020	27 May 2021		
End Date	30 Jan 2019	15 Nov 2019	15 May 2020	20 Nov 2020	28 May 2021		
Audit Days	6	2	2	2	2+1	2	
Any change in workforce numbers that may impact visit duration (if yes add new number)	N	N	N	N	N	Y/N	Y/N
Process / aspect / location							
Opening meeting	√	√	R	R	R	√	
Closing meeting	√	√	R	R	R	√	
Changes to organizational context	√	√	R	R	R	√	
Management Review	√	√	R	R	R	√	
Internal Audits	√	√	R	R	R	√	
Continual Improvement	√	√	R	R	R	√	
Management of change	√	√	R	R	R	√	
Corrective action	√	√	R	R	R	√	
Preventive action	√	√	R	R	R	√	
Complaint Management	√	√	R	R	R	√	
Use of Logo	√						
Performance against the client management system objective	√	√	R	R	R	√	
Shift coverage outside working hours					R		
Legal compliance and the evaluation	√	√	R		R		
Objective and programme	√	√	R	R	R		
Communication, participation and consultation	√	√	R	R	R		
Incident Investigation	√		R	R	R		
Hazard identification, risk assessment and determining control	√	√	R	R		√	
HRD (Competence, training and awareness); Resource roles and responsibility	√	√	R			√	
Emergency preparedness and response	√	√	R	R		√	
Performance measurement and monitoring	√		R	R		√	
Purchasing and Contractor management (CSMS)	√		R			√	
Production: - Ethanol (Fermentation, Distillation,	√						



Control room and Production Lab) - Main Laboratory							
Warehouse (Logistic): - Raw Material (storage tank) - Supporting material - Finished Goods (storage tank) - Filling station area - Spare part	√		R			√	
Utilities : - Cooling system - Boiler, Generator - Coal stock pile, Crusher	√	√			R		
Maintenance : - Mechanical - Rotary - Electrical and Instrument - Workshop - Static	√	√				√	
Transport (Trucking)	√					√	
General Area : - Office - Security - First Aid Room - Company transport	√			R (Front Parking Area)			

R = Remote Audit

√ = On Site

Scope of the management system	Manufacture of Ethanol
Exclusion	None

Visit start time (approximate)	09.00	Visit end time (approximate)	16.00
The actual start and finish times for the visit will be agreed at the pre-visit contact with the assessor and recorded in the report introduction.			



Additional information

Opportunities for improvement

If we identify opportunities to improve your already compliant system, we will either record them in the process table applicable to the area being assessed or in the Executive summary of the report if they can deliver improvement at a strategic level.

Confidentiality

We will treat the contents of this report, together with any notes made during the visit, in the strictest confidence and will not disclose them to any third party without written client consent, except as required by the accreditation authorities.

Sampling

The assessment process relies on taking a sample of the activities of the business. This is not statistically based but uses representative examples. Not all of the detailed nature of a business may be sampled so, if no issues are raised in a particular process, it does not necessarily mean that there are no issues, and if issues are raised, it does not necessarily mean that these are the only issues.

Legal entity

The accredited legal entity and client facing office that has provided the assessment service in this report is referenced in the applicable agreement for this service.

Generic audit objectives and team responsibilities

The generic audit objectives and team responsibilities are included in the Client Information Note 'Assessment Process'. Any visit specific objectives for the next visit will be recorded in the report of the previous visit and will be addressed through the visit plan for that visit. The assessment standard and roles of the audit team are defined in the assessment visit confirmation sent to the client.

Audit Criteria

The audit criteria consist of the assessment standard and the client's management system processes and documentation.

Additional observers

Any additional observers will be as formally communicated to the client.

2. Separate Assessment Plan

Note: if the visit involves more than one team member and is more than one day duration, an additional plan detailing the activities of each member of the team on each day will be required.

(27 May 2021 Day 1)

09.00 Introductory meeting with management to explain the scope of the visit, assessment methodology, method of reporting and to discuss the company's organisation (approximately 30 minutes). The Team Leader will agree a time to meet with top management to discuss policy and objectives for the management system.

LR team briefing for a team of two or more assessors or (experts).

<Laksono Purnomo> (Team Leader)

<Sugeng Hartono>

09.30 Discussion of all outstanding issues from previous visits.

Management elements :

Context of the organization

Leadership, Worker participation and consultation, communication

Planning

12.00 Lunch.

Production:

- Ethanol

- Main Laboratory

16.00 Production change shift audit

17.00 Report writing.

18.00 Close.

(28 May 2021 Day 2)

08.30 Discussion with Top Management

09.00 Competence and awareness (certified personnel specialized skilled)

Emergency preparedness and response

Performance evaluation

09.00

Utilities :

- Cooling system

- Boiler, Generator

- Coal stock pile, Crusher

Including the internal and external inspection report

12.00 Lunch

12.00

Lunch

13.00 Improvement include incident investigation, NC and corrective actions

13.00

Documented information

14.00 Review of day's findings

Review of day's findings

14.30 Preparation of final report

Preparation of final report

15.00 Closing meeting with management to present a summary of findings and recommendations.

3. Report Considerations

LRQA Report considerations		
Have there been any deviation from the original assessment plan:	Yes/No	If yes detail these in the introduction section of the report along with the reasons for the deviations
Have there been any significant issues impacting on the audit programme:	Yes/No	If yes detail these in the introduction of the report and amend the APP
Have there been any significant changes that affect the management system of the client since the last audit took place:	Yes/No	If yes detail these within the executive summary section of the report
Have any unresolved issues been identified during the assessment:	Yes/No	If yes detail these within the executive summary section of the report
Was the audit undertaken a combined or integrated audit:	Yes/No	If yes confirm what type of audit and the standards covered in the introduction to the report.
Was the organisation effectively controlling the use of the certification documents and marks:	Yes/No	If no document within the reporting table covering the mandatory elements
If applicable has the organisation taken effective corrective action regarding previously identified nonconformities:;	Yes/No	Record outcome in the findings log against the relevant findings.
Does the management system of the organisation continue to meet the applicable requirements and meet the expected outcomes:	Yes/No	If no details reasons within the executive summary of the report
Does the scope of certification continue to be appropriate to the activities/products/services of organisation:	Yes/No	If no then document the actions necessary in relation to the scope in the executive summary of the report and amend the APP as required.
Were the objectives of the visit as defined in the APP fulfilled during the visit:	Yes/No	If no detail the reasons and any necessary actions in the executive summary of the report and amend/update the APP

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Occupational Health and Safety Management System

Migration Checklist

Client Name	PT Molindo Raya Industrial	Reference Number	JKT6015008
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Clause No.	Title Migration Requirements	Non-Conformance Ref	Date
Example	The xxx relevant to the organisations significant hazards and risks are xxxx	ART ref Major/Minor Compliant? Y/N	NC closure Date Audit Date
4	Context of the Organization		
4.1	Understanding the organization and its context		
	The internal and external issues that are relevant to the organization's purpose that affect its ability to achieve the intended outcome(s) of its Occupational health and safety management system (OH&S management system) have been determined.		
		Compliant? Y	27 May 2021
4.2	Understanding the needs and expectations of interested parties		
	The organization has determined a) the interested parties in addition to workers that are relevant to the OH&S management system; b) the requirements (needs & expectations) of workers and other interested parties that are relevant to the OH&S management system.		
		Compliant? Y	
		Minor NC	27 May 2021
		Compliant? Y	
	It has been determined which of these needs and expectations are or could become legal requirements and other requirements.		
		Compliant? Y	
4.3	Determining the scope of the OH&S management system		
	The organization has determined the boundaries (units, functions and physical boundaries) and applicability of the OH&S management system to establish its scope.		
		Compliant? Y	
	When determining the scope of the OH&S management system • external and internal issues (as identified in 4.1 have been considered?		
		Compliant? Y	
	When determining the scope of the OH&S management system • Legal and other requirements (as identified in 4.2), • planned or performed work-related activities, have been considered.		
		Compliant? Y	
	The OH&S management system includes the activities, products and services within the organization's control or influence that can impact the organization's OH&S performance.		
		Compliant? Y	
	Is the scope available as documented information?		
		Compliant? Y	
4.4	OH&S management system		
	The OH&S addresses the identified processes needed and their interactions to achieve the intended outcomes.		
		Compliant? Y	
5	Leadership and Worker Participation		
5.1	Leadership and commitment		
	Top management has demonstrated leadership and commitment with respect to the OH&S management system by:		
		Compliant? Y	
	• taking overall responsibility and accountability for the prevention of work-related injury and ill health as well as the provision of safe and healthy workplaces and activities		
		Compliant? Y	
	• ensuring that the OH&S policy and related OH&S objectives are		

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Migration Checklist

Clause No.	Title Migration Requirements	Non-Conformance Ref	Date
	established and are compatible with the strategic direction of the organization	Compliant? Y	
	<ul style="list-style-type: none"> ensuring the integration of the OH&S management system requirements into the organization's business processes 	Compliant? Y	
	<ul style="list-style-type: none"> ensuring that the resources needed to establish, implement, maintain and improve the OH&S management system are available 	Compliant? Y	
	<ul style="list-style-type: none"> communicating the importance of effective OH&S management and of conforming to the OH&S management system requirements 	Compliant? Y	
	<ul style="list-style-type: none"> ensuring that the OH&S management system achieves its intended outcome(s) 	Compliant? Y	
	<ul style="list-style-type: none"> directing and supporting persons to contribute to the effectiveness of the OH&S management system; 	Compliant? Y	
	<ul style="list-style-type: none"> ensuring and promoting continual improvement 	Compliant? Y	
	<ul style="list-style-type: none"> supporting other relevant management roles to demonstrate their leadership as it applies to their areas of responsibility 	Compliant? Y	
	<ul style="list-style-type: none"> developing, leading and promoting a culture in the organization that supports the intended outcomes of the OH&S management system 	Compliant? Y	
	<ul style="list-style-type: none"> protecting workers from reprisals when reporting incidents, hazards, risks and opportunities 	Compliant? Y	
	<ul style="list-style-type: none"> ensuring the organization establishes and implements a process(es) for consultation and participation of workers (see 5.4) 	Compliant? Y	
	<ul style="list-style-type: none"> supporting the establishment and functioning of health and safety committees, [see 5.4 e) 1)] 	Compliant? Y	
5.2	OH&S policy		
	Top management have established, implemented and maintained an OH&S policy	Compliant? Y	
	that within the scope of the OH&S is appropriate to <ul style="list-style-type: none"> includes a commitment to provide safe and healthy working conditions for the prevention of work related injury and ill health and is appropriate to the purpose, size and context of the organization and to the specific nature of its OH&S risks and OH&S opportunities includes a commitment to eliminate hazards and reduce OH&S risks (see 8.1.2) includes a commitment to consultation and participation of workers, and, where they exist, workers' representatives. includes a commitment to fulfil legal requirements and other requirements 	Minor NC Compliant? Y	27 May 2021
	The policy is: <ul style="list-style-type: none"> available as documented information communicated within the organization available to interested parties, as appropriate relevant and appropriate. 	Compliant? Y	
5.3	Organizational roles, responsibilities and authorities		
	Responsibilities and authorities for relevant roles are assigned and communicated at all levels and maintained as documented information.	Compliant? Y	
5.4	Consultation and participation of workers		
	Process(es) for consultation and participation of workers at all		

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Migration Checklist

Clause No.	Title Migration Requirements	Non-Conformance Ref	Date
	applicable levels and functions and, where they exist, workers' representatives are established, implemented and maintained.	Compliant? Y	
	Obstacles or barriers to participation are determined and removed those that cannot be removed are minimized.	Compliant? Y	
6	Planning for the OH&S Management System		
6.1.	Actions to address risks and opportunities		
	The processes needed to meet requirements have been established and implemented to give assurance that the OH&S management system can achieve its intended outcomes including <ul style="list-style-type: none"> prevention or reduction of undesired effects 	Compliant? Y	
	The risks and opportunities related to: <ul style="list-style-type: none"> internal and external issues (4.1) the needs and expectations of interested parties (4.2) the scope of the OH&S management system (4.3) hazards (6.1.2.1) OH&S risks and other risks (6.1.2.2) OH&S opportunities and other opportunities (6.1.2.3) legal and other requirements (6.1.3) changes in the organization, processes or the OH&S management system (8.1.3) any other issues and requirements have been determined. 	Minor NC Compliant? Y	27 May 2021
	Documented information is maintained for: <ul style="list-style-type: none"> Risks and opportunities that need to be addressed The processes needed and that they are carried out as planned 	Compliant? Y	
6.1.2	<u>Hazard identification and assessment of risks and opportunities</u> Ongoing and proactive process(es) for hazard identification are established, implemented and maintained.	Minor NC Compliant? Y	27 May 2021
	The process(es) consider: <ul style="list-style-type: none"> How the work is organized, social factors, leadership and culture in the organization Routine and non-routine activities and situations Past relevant incidents, incl. Emergencies and their causes Potential emergency situations People Other issues actual or proposed changes in organization, operations, processes, activities and OH&S management system changes in knowledge of, and information about, hazards 	Compliant? Y	
	Established, implemented and maintained process(es) for assessing OH&S risks consider the effectiveness of existing controls.	Compliant? Y	
	Processes are established, implemented and maintained for <ul style="list-style-type: none"> assessing OH&S opportunities to enhance OH&S performance other opportunities for improving the OH&S management system 	Compliant? Y	
	Documented information is maintained and retained on the methodology(ies) and criteria for assessing OH&S risks.	Compliant? Y	
6.1.3	<u>Determination of legal requirements and other requirements</u> Legal requirements and other requirements are maintained as documented information and updating is ensured.	Compliant? Y	

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Clause No.	Title Migration Requirements	Non-Conformance Ref	Date
6.1.4	<u>Planning Action</u> The integration and implementation of the actions into its OH&S management system processes (see 6.2; 7; 8; 9.1); and other business processes are planned and the effectiveness of actions evaluated.		
		Compliant? Y	
	Actions are planned to address <ul style="list-style-type: none"> • Legal requirements and other requirements • Prepare for and respond to emergency situations • Risks and opportunities 		
		Compliant? Y	
6.2	OH&S objectives and planning to achieve them		
6.2.1	<u>OH&S Objectives</u> The OH&S objectives take in to account <ul style="list-style-type: none"> • risks and opportunities; • the results of consultation with workers and, where they exist, workers' representatives and are: <ul style="list-style-type: none"> • measurable (if practicable) or capable of performance evaluation • monitored • communicated • updated as appropriate and • documented information on the OH&S objectives has been retained. 		
		Compliant? Y	
6.2.2	<u>Planning to achieve OH&S objectives</u> The organization has determined, when planning, how to achieve its OH&S objectives by <ul style="list-style-type: none"> • what will be done • what resources will be required • who will be responsible • when it will be completed • how the results will be evaluated using indicators for monitoring progress • how actions to achieve OH&S objective are integrated into business processes. 		
		Compliant? Y	
7	Support		
7.1	Resources		
	Resources needed for the establishment, implementation, maintenance and continual improvement of the OH&S management system are determined and provided.		
		Compliant? Y	
7.2	Competence		
	Workers are competent, including the ability to identify hazards, based on appropriate education, training or experience.		
		Compliant? Y	
7.3	Awareness		
	Workers are made aware of: <ul style="list-style-type: none"> • the OH&S policy and OH&S objectives; • their contribution to the effectiveness of the OH&S management system, including the benefits of improved OH&S performance • incidents and the outcomes of investigations that are relevant to them • hazards, OH&S risks and actions determined that are relevant to them • the ability to remove themselves from work situations that they 		

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Clause No.	Title Migration Requirements	Non-Conformance Ref	Date
	consider present an imminent danger to their life or health, as well as the arrangements for protecting them from undue consequences for doing so.		
7.4	Communication		
	Internal and external communication processes have been established, implemented and maintained.	Compliant? Y	
	Communication processes determine <ul style="list-style-type: none"> on what will be communicated; when to communicate; with whom to communicate: <ul style="list-style-type: none"> internally among the various levels and functions of the organization; among contractors and visitors to the workplace; among other interested parties; how to communicate. 	Compliant? Y	
	The organization has considered diversity aspects (e.g. gender, language, culture, literacy, disability) when considering its communication needs.	Compliant? Y	
	When establishing the communication processes, the organization has: <ul style="list-style-type: none"> considered views of external interested parties considered its legal requirements and other requirements ensures that OH&S information to be communicated is consistent with information generated within the OH&S management system, and is reliable. 	Compliant? Y	
	Documented information as evidence of its communications is retained (as appropriate).	Compliant? Y	
7.5	Documented information		
7.5	When creating and updating documented information the organization ensures appropriate <ul style="list-style-type: none"> appropriate format (e.g. language, software version, graphics) and media (e.g. paper, electronic) availability and suitability for use and adequate information protection. 	Compliant? Y	
8	Operation		
8.1	Operational planning and control		
8.1.1	At multi-employer workplaces, the organization coordinates relevant parts of the OH&S management system with other organizations.	Minor NC Compliant? Y	27 May 2021
8.1.3	Planned temporary and permanent changes are controlled and the consequences of unintended changes are reviewed taking mitigating action if necessary.	Compliant? Y	
8.1.4	Procurement of products and services is controlled.	Compliant? Y	
	Procurement process(es) are coordinated with contractors to identify hazards and assess and control OH&S risks.	Compliant? Y	
	Occupational health and safety criteria for the selection of contractors are defined and applied.	Compliant? Y	
	When outsourcing functions and processes <ul style="list-style-type: none"> they are controlled outsourcing arrangements are consistent with legal and other requirements 		

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Clause No.	Title Migration Requirements	Non-Conformance Ref	Date
	<ul style="list-style-type: none"> type and control applied is defined within the OH&S management system 	Compliant? Y	
8.2	Emergency preparedness and response		
	Process(es) needed to prepare for and respond to potential emergency situations, as identified in 6.1.2.1, include: <ul style="list-style-type: none"> providing training for the planned response communicating and providing relevant information to all workers on their duties and responsibilities communicating relevant information to contractors, visitors, emergency response services, government authorities and, as appropriate, the local community 	Compliant? Y	
9	Performance Evaluation		
9.1.	Monitoring, measurement, analysis and performance evaluation		
	OH&S performance is monitored, measured, analysed and evaluated.	Compliant? Y	
	The organisation has determined: <ul style="list-style-type: none"> what needs to be monitored and measured the methods for monitoring, measurement, analysis and performance evaluation, as applicable, to ensure valid results the criteria against which the organization will evaluate its OH&S performance when the monitoring and measuring shall be performed when the results from monitoring and measurement shall be analysed, evaluated and communicated 	Compliant? Y	
	Calibrated or verified monitoring and measurements equipment is used as appropriate.	Compliant? Y	
	Processes to evaluate achievement of compliance with legal and other requirements are planned and implemented including the frequency of evaluation being determined.	Minor NC Compliant? Y	27 May 2021
9.2.	Internal audit		
	The organisation ensures that <ul style="list-style-type: none"> results of audits are reported to relevant managers relevant audit results are reported to workers, workers' representatives and other relevant interested parties 	Compliant? Y	
9.3.	Management review		
	Management Review shall include consideration of <ul style="list-style-type: none"> status of actions from previous management reviews changes in <ul style="list-style-type: none"> needs and expectations of interested parties risks and opportunities information on the OH&S performance, incl. trends 	Minor NC Compliant? Y	27 May 2021
	Outputs of management review include <ul style="list-style-type: none"> opportunities to improve integration of the OH&S management system with other business processes if needed any implications for the strategic direction of the organisation 	Compliant? Y	
	Relevant outputs of the management reviews are communicated to workers and, where they exist, workers' representatives.	Compliant? Y	

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Migration Checklist

Clause No.	Title Migration Requirements	Non-Conformance Ref	Date
10	Improvement		
	The need for corrective actions of incidents or are evaluated with the participation of workers and other interested parties.	Compliant? Y	
	The organisation can demonstrate enhanced OH&S performance through continual improvement in the suitability, adequacy and effectiveness of the OH&S management system	Compliant? Y	
	Final Statement		
	A comprehensive migration review has been undertaken and conformance established against ISO 45001:2018 The main compliance evidence is held in the Migration Report.		
	Name : Laksono Idi Purnomo (OHS MS LA)	Passed	27 May 2021