Surveillance 1

Report for:

PT Molindo Raya Industrial

LR reference:	JKT6004111 / 2274698
Assessment dates:	12-November-2018
Reporting date:	21-November-2018
Client address:	Jl. Sumber Waras No.255,Lawang,Malang, East Java ,ID
Assessment criteria:	ISO 9001:2015
Assessment team:	Iqbal, Mochamad
LR Client Facing Office:	JKT Indonesia OU

Contents

Attachments:

JKT6004111_APP__QMS_SV1_Mix.doc

This report was presented to and accepted by:

Name: Mrs Erlies

Job title: Senior QA Manger

01. Executive report

Assessment outcome:

This visit was to assess the compliance of the management system of PT Molindo Raya Industrial against ISO 9001:2015 as defined in the audit planning documentation. The outcome of the visit is recorded below.

This is 1st surveillance visit assessment and the main objective of the assessment visit was verified and observed The Quality Management system in PT. Molindo Raya International , according to ISO 9001:2015 requirements.

Based on sample taken, there is no significant issue found that lead into major problem, however several opportunities for improvement were identified in this audit.

With regard to this result, the organization is still recommended to be certified against ISO 9001:2015 and subjected to have 2nd surveillance visits. Next visit will be planned in June 2019 in 1 man-days.

Continual improvement:

Continual improvement were seen and found quite well, however for the implementation, the organization system still need a more observing the risk to provide assurance the integrity of the system.
The management remains committed to ensure that the Quality Management System (QMS) is properly implemented and maintained as an assurance of product quality and company performance .

Areas for senior management attention:

Several note for improvement could be used as tools for internal improvement

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		**Assessment Criteria (Clause)**	
Grade		**Issue Date**	
Status		**Process / Aspect**	
Location(s)			
Statement of Non Conformity			
Requirement			
Evidence			
Proposed correction, corrective action and timescales			
Correction			
Root Cause analysis			
Corrective action			
LR has reviewed and verified the implementation of actions taken.		**Date of closure**	

03. Assessment summary

Visit generic objective:

This was a Surveillance 1 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:

Mrs, Erlies Sartini
Mrs. Kartika
Mr. Yudi
Mr. Indrayanto
Mr. Wartono
Mr, Edis
Mr. Cahyo
Ms. Ana
Mr. Hadi
All attending at opening meeting at 08.30 am and closing meeting at 16.00 pm

Visit specific objective:

review risk and opportunities

Introduction:

This surveillance audit was conducted on 12 November 2018 by Mochamad Iqbal (Team Leader) . Several areas were assessed as a sample for this surveillance. The audit methods was a sampling process that explained in opening meeting and closing meeting. The opening meeting was conducted on plant site and attended by management. At the end of the assessment, a closing meeting was held to present assessment outcome.

The assessment is based on the ISO 9001:2015 standard “Quality Management Systems - requirements”
This report contains an audit trail and finding observed during the audit which explained and agreed by the auditee during closing meeting.

Assessment of:	Management Elements top management	**Auditee(s):**	Mrs Erlies and Mrs Kartika	**Assessor:**	Iqbal, Mochamad

Audit trails and sources of evidence:

Changes to organizational context, Management review, Internal Audits, Continual improvement, Management of change (System & Organisation), Corrective action, Management of complaints, Performance against the client's management system objectives, Use of Logo.

Evaluation and conclusions:

Interview with Top Management has been done; some important points were discussed and summarized as following.
The company currently developing the integrated online system by using SAP and willing to share with the public in near future still in progress since last visit launched will be in January 2019.
Management has explained the biz competitiveness identification with company image approach including its strategy to
win the market.
Biz achievement mostly has exceeded the target currently the program for operational is increasing the production capacity.
Market segmentation was same (mostly beverages and Pharmacy); in near future it will expand to another sector such as bio fuel.
Market destination was expanded to export. None of market regulation becomes trade barrier.
In general, company still keeps on operation excellence strategy; people development program has been provided to accommodate this strategy
No changes on policy and organization.
Management control through implementation of internal audit and management review has been done mid 2018
None of customer complaint received for the last one year.

Areas for attention:

Care should be take to ensure that the internal audit need to focus on risk and opportunities rather than compliancy to the internal requirement.
Some Risk in food safety aspect such as fraud and food defense need to be include in the risk identification

Assessment of:	HRD and IT	**Auditee(s):**	Mr Hadi and Mr Edis	**Assessor:**	Iqbal, Mochamad

Audit trails and sources of evidence:

Risk and opportunities 2018
Quality Objective IT : Days of problem,
In progress of SAP.
Planning for go live SAP on Jan 2019
Anti virus management
JOb competencies
Training program 2018
Medical check up personal employee record

Evaluation and conclusions:

IT was well demonstrated, the organization have been determine, provide and maintenance equipment (Server, PC,
laptop); and Software; Including information and networking technology.
Risk and Opportunity regarding IT had been identified, however one note were given below.
Quality objective 2018 have been established with well achievement for no more than 1 hour breakdown occurred.
Back up management have been established and implemented to avoid the lost of importance data.
Anti virus management had been implemented to protect the reliability.
Risk and opportunities for HRD have been registered and follow up properly with the action plan from the management staff such as training for SAP that will be implemented in January 2019
Training program and the organization have been set up and centralized in HRD function trouble shooting now collected in include in the training material as organization knowledge
Quality objective also monitored properly and in HRD function, one note were given as follow:

Areas for attention:

In IT care should be taken to review the risk register related the implementation of SAP that will be go live in Jan 2019
Care should be taken to follow up the medical exam result which some employee were resulted fit for job with note.

Assessment of:	QC and Logistic (raw material warehouse and supporting)	**Auditee(s):**	Mr Yudi, and Ms Ana	**Assessor:**	Iqbal, Mochamad

Audit trails and sources of evidence:

Risk and opportunities 2018
Stock control for RM and supporting material
Delivery schedule and its records
Quality objective 2018
working environment
Inspection report
Laboratory infrastructure
Inspection procedure

Evaluation and conclusions:

Quality objective 2018 monitored properly and well achieved
stock rotation control also monitored and record properly, last stock take resulted accuracy 99.98%
issuing schedule for raw material for monthly basis also record properly.
No significant issue to be highlighted.
QC function also showing their good performance with no customer complaint issue received since year ago.
the procedure and work instruction also well manage in the laboratory. staff demonstrated good competences during audit.

Areas for attention:

QC need to add risk related repeat test due to the deviation that could be cause by human error or process error
Finance aspect also need to be given in the risk related to expiry of reagent or chemical used for inspection

04. Next visit details

Standard(s) / Scheme(s)	ISO 9001:2015	**Visit type**	Surveillance 2
Audit days	1.00 DAY	**Due date**	April, 2019
Team			

Site	Audit days	Activity codes
Jl. Sumber Waras No.255,Malang, East Java,ID	1.0 DAY	106802

05. Appendix

1. Audit Programme/Plan

Both the audit plan and the programme are dynamic and must be in line with the client's developments. Any (last minute) changes are possible with valid reasons e.g. organisational changes, processes, management review results etc. Prior to the closing meeting the audit team should (re)confirm the programme and identify any changes, E.g. to the management system, extent, time or dates of the audit, competences...

Visit Type		CR	SV1	SV2	SV3	SV4	SV5	Certificate Renewal
Due Date		May 18	Nov 18	May 19	Nov 19	May 20	Dec 20	May 21
Start Date		7 May 18	12/11/18	TBA	TBA	TBA	TBA	TBA
End Date		9 May 18	12/11/18	TBA	TBA	TBA	TBA	TBA
Audit Days		1	1	1	1	1	1	4
Separate assessment plan?		Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
Any change in workforce numbers that may impact visit duration (if yes add new number)		Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
Where identified above see separate current assessment plan for further detail.								
Process / aspect / theme / location *Final selection will be determined after review of management elements and actual performance*								
Opening meeting		✓	✓	✓	✓	✓	✓	✓
Closing meeting		✓	✓	✓	✓	✓	✓	✓
Changes to organizational context(2)		✓	✓	✓	✓	✓	✓	✓
Management Review		✓	✓	✓	✓	✓	✓	✓
Internal Audits		✓	✓	✓	✓	✓	✓	✓
Continual Improvement		✓	✓	✓	✓	✓	✓	✓
Management of change		✓	✓	✓	✓	✓	✓	✓
Corrective action		✓	✓	✓	✓	✓	✓	✓
Preventive Action(3)		✓	✓	✓	✓	✓	✓	✓
Complaint Management		✓	✓	✓	✓	✓	✓	✓
Use of Logo (LRQA & Accreditation Marks)		✓	✓	✓	✓	✓	✓	✓
Performance against the client management system objective		✓	✓	✓	✓	✓	✓	✓
(1)		✓						
		✓						
Sales and Adm. sales Incl. FG and Delivery		✓		✓			✓	✓
Production Ethanol (Fermentation & Distillation)		✓		✓		✓		✓
Logistic (Including Warehouse of SP, RM)		✓	✓		✓		✓	✓
Purchasing		✓			✓		✓	✓
Maintenance & Utility		✓			✓			✓
QA & Quality control (Including Calibration)		✓	✓			✓		✓
HR Development		✓	✓					✓
General affair		✓		✓				✓
IT		✓	✓					✓
Security		✓				✓		✓

1: Complete the list of organisation (parts), departments and/or processes of the different locations

2: Required for Annex SL based Standards
3: Not required for Annex SL based Standards

Scope
Any revised scope will be as agreed in formal correspondence between LRQA and the client or defined in section 4 of the previous LRQA visit report.

Scope	Manufacture of Ethanol
Exclusion	8.3 Design and Development

Visit start time (approximate)	09.00	Visit end time (approximate)	17.00
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/or is more than one day duration, an additional plan detailing the activities of each member of the team on each day will be required.

(Day 1)

08.30	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.
09.00	LRQA team briefing for a team of two or more assessors or (experts).
	Mochamad Iqbal (Team Leader)
09.15	Top Manajemen Interview and Mandatory elements
10.30	Logistic
12.00	Lunch
13.00	QC
14.30	HRD IT
15.30	Review of day's findings
16.00	Preparation of final report
16.30	Closing meeting with management to present a summary of findings and recommendations.

Note; Information on the objectives of the various visits can be found in the Client Information included in the report or on our website www.lrqa.com. Furthermore on the website there are Client Information Notes available for the various visit types. The audit criteria and team members date and locations are also stated on the front page of the report. Scope of certification and roles and responsibilities of the audit team members are expressed in the Audit Program Plan.

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