

Focus Visit

Report for:

PT Molindo Raya Industrial

LR reference:	JKT6015008 / 3898768
Assessment dates:	07-October-2021 - 08-October-2021
Reporting date:	13-October-2021
Client address:	Jl. Sumber Waras No. 255, Lawang, Malang , ID
Assessment criteria:	ISO 45001:2018
Assessment team:	Laksono Purnomo
LR Client Facing Office:	JKT Indonesia OU

Lloyd's Register Group Limited, its affiliates and subsidiaries, including Lloyd's Register Quality Assurance Limited (LRQA), and their respective officers, employees or agents are, individually and collectively, referred to in this clause as 'Lloyd's Register'. Lloyd's Register assumes no responsibility and shall not be liable to any person for any loss, damage or expense caused by reliance on the information or advice in this document or howsoever provided, unless that person has signed a contract with the relevant Lloyd's Register entity for the provision of this information or advice and in that case any responsibility or liability is exclusively on the terms and conditions set out in that contract.



Contents

Page

01. Executive report	3
02. Assessment findings	4
03. Assessment summary	16
04. Next visit details	23
05. Appendix	24

Attachments:

JKT6015008_APP_OHS_FV_Oct 2021.doc

This report was presented to and accepted by:

Name: Mrs. Erlis Sartini

Job title: MR



01. Executive report

Assessment outcome:

This visit was to assess the compliance of the management system of PT Molindo Raya Industrial against ISO 45001:2018 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.

Continual improvement:

SHE Programs Y2021

Zero Accident Y2021

Employees Satisfaction Questionnaire

Installation, Storage tanks and Machines Inspection



Areas for senior management attention:

Please to see area for attention and finding log.

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	Closed	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	FV_Oct 2021_by LPZ Understanding the needs and expectations of workers related to OHSMS have been identified refers to employees satisfaction questionnaire on 30-09-2021.		
LR has reviewed and verified the implementation of actions taken.	Date of closure	07-October-2021	

Reference number	3643680_JKALPZ02	Assessment Criteria (Clause)	ISO 45001:2018 (5.2)
Grade	Minor NC	Issue Date	28-May-2021
Status	Closed	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	FV_Oct 2021_by LPZ OHS policy has include a commitment to consultation and participation of workers refers to IMS Policy on 1-09-2021.		
LR has reviewed and verified the implementation of actions taken.	Date of closure	07-October-2021	

Reference number	3643680_JKALPZ04	Assessment Criteria (Clause)	ISO 45001:2018 (9.3)
Grade	Minor NC	Issue Date	28-May-2021
Status	Closed	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	FV_Oct 2021_by LPZ (Done) Notulen RTM 8 Sep 2021 No.10 HIRA up date		
LR has reviewed and verified the implementation of actions taken.	Date of closure	07-October-2021	

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	Closed	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	<p>Laboratory</p> <p>1. Site observation and inspection record</p> <p>Production :</p> <p>1. Provide water pipe maintenance at distillation area. Time : End of August, 2021</p> <p>2. Revise HIRADC table with non managerial personnel involvement . Time : End of August, 2021</p> <p>3. Implement inspection guidance (method, competent personnel and measurement equipment accuracy) related to gas detector monitoring and measurement. Time : End of August, 2021</p> <p>Laboratory :</p> <p>Provide fume hood inspection and maintenance guidance. Time : End of July, 2021</p> <p>.</p>
Correction	<p>Production :</p> <p>1. Repair water pipe installation in corroded condition and monitor regularly</p> <p>2. Identify potential fire hazard at distillation area with non managerial personnel involvement</p> <p>3. Provide gas detector monitoring and measurement based on inspection guidance</p> <p>Laboratory :</p> <p>Looking for references to inspect and maintain fume hood, determine method, period and implement the Fume hood inspection and maintenance</p> <p>.</p>
Root Cause analysis	<p>Production :</p> <p>1. Lack awareness about pipe water monitoring</p> <p>2. Lack awareness about potential risk and initially ISO 45001:2018 implementation</p> <p>3. Lack awareness about gas detector monitoring and measurement</p> <p>Laboratory :</p> <p>Lack of awareness about fume hood inspection and maintenance</p> <p>.</p>
Corrective action	<p>FV_Oct 2021_by LPZ (Open)</p> <p>Production</p> <p>1. Repair water pipe installation in corroded condition and monitor regularly</p> <p>5.1 Jadwal Preventif Maintenance Pipa on 1 Aug 2021 by Dept Mechanic Static (Done)</p>



Corrective action	<p>2. Identify potential fire hazard at distillation area with non managerial personnel involvement 5.2. Form HIRA Bag. Produksi-Distilasi 30 Aug 2021 No.17 (Done)</p> <p>3. Provide gas detector monitoring and measurement based on inspection guidance (Done) 5.3 IK Pengukuran Gas dengan Gas Detector 20 Sep 2021 Document No.SHE/IK-06/04 Rev01/00 by sampling Tabel Monitoring Gas Flammable on 3, 8, 17, 28 September 2021 at Distillation Plant (Weekly HSE Patrol)</p> <p>Laboratory Looking for references to inspect and maintain fume hood, determine method, period and implement the Fume hood inspection and maintenance 5.4 Penawaran Harga EnviLab (Velocity/Laju alir of Fume Hood Inspection by EnviLab 1 tahun sekali) 30 Sep 2021, Conducted on W2 October 2021 (Done).</p>	
	LR has reviewed and verified the implementation of actions taken.	Date of closure 13-October-2021

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	Open	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>		

Proposed correction, corrective action and timescales	.	
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	FV_Oct 2021_by LPZ (Open) 1. Competence Development Programs Y2021 (Open, in progresses) Ahli K3 Listrik/Electrical Safety Expert = Realization on 20 Sep - 8 Oct 2021 (Done, 1 personnel) ; Surat Keterangan No.Pers. 749/3747/IX.2021 Petugas K3 Listrik/Electrical Safety Officer = Realization on 13-18 September 2021 (Done, 2 personnel) ; Surat Keputusan Menteri Tenaga Kerja No.Kep 5/527/AS.02.01/VI/2020 Ahli K3 Kebakaran/Fire Fighting Team = Plan Semester II Y2021 (Open, waiting for training availability by 3rd party) Competent personnel for Class A, C and D. Noted that Class B is certified for 4 personnel (valid certified until 19-10-2021) Chemical Safety Officer/Petugas K3 Kimia = Plan Semester II Y2021 (Open, waiting for training availability by 3rd party) Ahli K3 Lingkungan Kerja/ Industrial Hygiene = Plan Semester II Y2021 (Open, waiting for training availability by 3rd party) 2. 3.2 Analisa Resiko Perusahaan (Safety) on 1 Aug 2021 (Done)	
LR has reviewed and verified the implementation of actions taken.	Date of closure	

Reference number	3898768_JKALPZ01	Assessment Criteria (Clause)	ISO 45001:2018 (9.1.1, 9.1.2)
Grade	Minor NC	Issue Date	08-October-2021
Status	New	Process / Aspect	Monitoring and measurement
Location(s)	Jl. Sumber Waras No. 255,Malang,ID		
Statement of Non Conformity	Biological, Ergonomic and Psychological factors have not been conducted as required by relevant regulation to ensure the control adequacy for respective activities, processes and areas.		
Requirement	ISO 45001:2018 Clause 9.1.2,9.1.2		
Evidence	Peraturan menteri Tenaga Kerja No.5 Year 2018 Monitoring and measurement report period semester I Y2021		
Proposed correction, corrective action and timescales	To improve monitoring and measurement implementation related to Biological, Ergonomic and Psychological factors (Plan Semester I Y2022)		
Correction	To review monitoring and measurement implementation (Plan Q4 Y2021)		
Root Cause analysis			
Corrective action			
LR has reviewed and verified the implementation of actions taken.	Date of closure		

Reference number	3898768_JKALPZ02	Assessment Criteria (Clause)	ISO 45001:2018 (6.2, 8.1)
Grade	Minor NC	Issue Date	08-October-2021
Status	New	Process / Aspect	Maintenance (Mechanical)
Location(s)	Jl. Sumber Waras No. 255,Malang,ID		
Statement of Non Conformity	<p>1. Mechanical</p> <p>- Root cause, evaluation and corrective action plan have not been provided to ensure relevant action(s) taken to eliminate potential risk (s) for un-achieved target.</p> <p>2. Site review at Workshop</p> <p>- Unsafe condition could be observed at workshop for damage/un-even working floor condition, no designated area for hot works including no welding/fire spark screen during hot work activity with potential accident include fire accident.</p> <p>- Pre-use inspection had been conducted for working machines and tools i.e. on/off function. However regular maintenance/inspection have not been planned and provided to ensure the safety availability during usage i.e. hand cutting/grinding with no cover during usage at workshop.</p>		
Requirement	ISO 45001:2018 Clause 6.1,8.1		
Evidence	<p>1. Monitoring Report KPI Period YTD August 2021 ; On time PM (Mechanical) ; Performance achievement average = 46%</p> <p>2. Site review at workshop</p>		
Proposed correction, corrective action and timescales	<p>1. To provided the root cause, evaluation and corrective action plan for un-achieved target in the KPI Y2021</p> <p>2. To improve workshop facility and inspection Plan Semester II Y2021 - Semester I Y2022</p>		
Correction	<p>1. To review current implementation of KPI monitoring system</p> <p>2. To review current operational control at workshop area</p>		
Root Cause analysis	<p>1. In-consistency monitoring system for KPI</p> <p>2. Workshop facility and lack of inspection machines/tools system</p>		
Corrective action			
LR has reviewed and verified the implementation of actions taken.	Date of closure		





Reference number	3898768_JKALPZ03	Assessment Criteria (Clause)	ISO 45001:2018 (8.1)
Grade	Minor NC	Issue Date	08-October-2021
Status	New	Process / Aspect	Distribution
Location(s)	Jl. Sumber Waras No. 255,Malang,ID		
Statement of Non Conformity	Inspection criteria related vehicle combustion flame arrester (filter knalpot) had not consistently implemented and maintained at Ethanol's transporter/trucking as prevention of fire accident.		
Requirement	ISO 45001:2018 Clause 8.1		
Evidence	Vehicle Inspection Checklist at sampling Vehicle N 9050 UG on 27-09-2021		
Proposed correction, corrective action and timescales	To improve the consistency of transporter inspection implementation at Ethanol (Plan Q4 Y2021)		
Correction	To review current implementation of transporter inspection at Ethanol.		
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 Focus 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

Management Representative : Erlies S

Legal Representative : Umar

Health Representative : Sofyan Hadi

Worker Representative : Martono, Listyo

Visit specific objective:

Compliance assessment.

Introduction:

Focus visit assessment have been conducted to verify the effectiveness of OHSMS refers to ISO 45001:2018 requirements.

Due to COVID-19 pandemic, the assessment have been conducted by remote by using Zoom, email and phone.

Assessment of:	Management elements	Assessor:	Laksono Purnomo
Auditee(s):	Umar ; Erlis Sartini Kartika ; Arief S		

Audit trails and sources of evidence:

Discussion of all outstanding issues from previous visits

Finding log

Context of the organization

Up date September 2021

- 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 ; **Employee Satisfaction Survey**
- OHSMS scope : Manufacture of Ethanol
- Processes and its interactions ; Organization structure ; Management of Change (Power Plant Capacity 3 MW - Operated on Y2020)

Leadership

OHS Policy (01-09-2021) ; Socialization : Information Board, Website

Communication, consultation and participation of workers ; OHS Committee/P2K3 Report Period Q3 Y2021 (Report No.07/K3LH/7.X/2021)

Planning

Action addresses to risks and opportunities

Up date 30-08-2021

COVID-19 Prevention ; Legal and other requirements compliance ; Employee Satisfaction Survey

Action plans

Hazard identification, risk and opportunity assessment

Maintenance and utility

Maintenance

Pengecekan transmitter ; working at height ; control by PPE, support, safety signage ; residual risk

Gelar/bongkar kabel ; electrical shocking ; control by LOTO, PPE ; residual risk

Grinding; eyes injury ; control by PPE

Utility

Up date 31-04-2021

Operational Boiler and Power Plant

Dust exposure (ISPA) ; Steam exposure ; ; Fire/explosion (Furnace) ; Control by PPE, Coverall, Engineering

control

Compressor ; Noise exposure, electrical shocking ; Control by PPE, Working instruction, Engineering control

Legal and other requirements

Corrective actions for previous findings

Boiler (Inspection date on January 2020)

Loader WS 400 ; Inspection date on 13-07-2021 (Overhaul)

Overhead Crane (31-12-2021)

Lightning arrester Distillation (Inspection date 17-02-2021)

Electrical installation 5540 KVA ; 555 KVA (Inspection date 21-12-2020 ; 21-12-2023)

Storage Tank No.T 5021 B (25-08-2023) ; T-1009 (25-08-2023) - 2 yearly

Permit Hazardous Material Transporter (B3) ; by sampling PT. Gondo Inti Persada (valid until 31-10-2022) - Ethanol ; L9589UM

Objectives, targets and programs

Monitoring Period Q3 Y2021

Realisasi Sasaran terpadu Tahun 2021

Zero accident ; Zero work related illness ; Regulations compliance

Emergency Preparedness and Response

Emergency facility inspection ; Hydrant Installation by external party (Inspection date 29-04-2020)

Emergency Drill Report (15-09-2021) ; First Aid ; Fire fighting ; Evacuation ; ERT ; Evaluation and analysis report ; recommendation

Performance evaluation

Workplace monitoring and measurement (Period April 2021) ; External laboratory ; Composting and laboratory ;

See assessment report surveillance 4

Chemical factors ; Physical factors

Plan air velocity (fume hood at Laboratory and filling station)

OHS Performance Period November 2020 - October 2021 ; Working Hours 19.441.833 ; Zero Accident

Minutes of Meeting MR Period 8 September 2021 ; Up date HIRA

Internal Audit Summary Report period 2-10 September 2021 ; Maintenance, Distribution, Security, HRD, QC, others ; Corrective actions (Minor Non Conformance and Observations) - Closed out

Improvement

Continual improvement programs Y2021 ; Employees Satisfaction Survey ; Certified competence personnel

Incident investigation, non conformance and corrective actions ; incident investigation report ; audit report

Evaluation and conclusions:

Discussion of all outstanding issues from previous visits

Corrective actions taken to follow up non conformance findings from previous assessment. Once verified, 3 of total 5 non conformance findings could be closed out with sufficient evidences with the rests in progresses.

Context of the organization

- Internal/external issues, needs and expectations of interested parties and workers have been identified and evaluated as internal period. One of focus activity related to Employee Satisfaction Survey

- OHSMS scope is remain same as previous assessment.

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

Leadership

- OHS policy have been reviewed, revised and socialized to respective personnel.
- External and internal communication, participation and worker consultation could be maintained i.e. through P2K3 (OHS Committee)

Planning

Action addresses to risks and opportunities have been developed from context of the organization, legal compliance, hazard identification and risk assessment. Actions plan had been provided as monitoring reference. 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. Action plans were provided to follow up the evaluation of compliance report (see finding log). 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. Progresses achievement of compliance regulations were monitored annually.

Emergency Preparedness and Response

Emergency facility inspection had been conducted as planned.
Emergency drill had been conducted and reported as planned.

Performance evaluation

Workplace monitoring and measurement had been conducted in 6 monthly bases. Based on report, generally results could met the regulation threshold.
Internal audit had been conducted and reported as internal planning. Corrective actions taken to follow up audit non conformance finding.
Management review had been conducted as internal period with review inputs and outputs as required by ISO 45001:2018.

Improvement

Continual improvement have been planned and implemented through some company programs Y2021.
Incident investigation had not been conducted with zero accident performance since last assessment.
Non conformance and corrective actions were developed from audits report.

Areas for attention:**Employee Satisfaction Questionnaire**

- Additional criteria could be considered related workplace safety and health and PPE provision to accommodate occupational safety and health aspects to get feedback from workers.
- Employee satisfaction questionnaire could be provided as part organization plan of opportunity from input needs and expectations of workers to ensure the programs effectiveness.

Assessment of:	Maintenance	Assessor:	Laksono Purnomo
Auditee(s):	Listyo TW ; Khoirul Anam ; Mifta Arif Kartika ; Umar ; Erliess		

Audit trails and sources of evidence:

Mechanical - Rotary

Preventive Maintenance Y2021

Period September 2021 ; Time based - PM CT Kingsun ; Order No.3000000008046 ; Work start/finished 28-08-2021 ; Completion date 08-09-2021 ; **KPI YTD August 2021 (On Time PM = 46%) ; Root cause analysis and corrective action plan**

Preventive Maintenance Check ; WO No.300000007762 ; 31.07.2021

Electrical and Instrument

Inspection Programs Y2021

Jadwal Verifikasi Tahun 2021 ; Calibration and verification schedule Y2021 ; TI 313 ; FV 329 ; TI 303 (19 May 2020)

Preventive Maintenance Y2021 ; Pengukuran rutin listrik Distilasi (Planned = 27-09-2021 ; Completion date = 01-10-2021 ; Thermal Imager Panel Distilasi)

Period September 2021 ; KPI YTD August 2021(On Time PM = 94%)

Preventive Maintenance Check ; WO No.300000008498 ; PM Distilasi ; 2-10-2021

External inspection of electrical installation 5540 KVA ; Inspection Date 21-12-2018 ; Recommendation (Pemeriksaan 1 tahun dan Pengujian 5 tahun) ; Thermal Imager (Monthly bases)

Permit To Work ; No.283/K3LH/30.VIII/2021 ; 30-08-2021 ; Electrical ; JS&E Analysis ; LOTO

Site review at workshop

Mesin Bubut ; Safety goggles ; Hand gloves ; Mask ; Inspection of equipments (Daily inspection)

Drilling ; Safety goggles ; Hand gloves ; Mask ; Inspection of equipments (Daily inspection)

Welding ; Inspection of equipments (Daily inspection)

Hand Grinding & Cutting ; Inspection of equipments (Daily inspection - On/Off - Cleanliness) ; **Regular Inspection**

Hot works area ; working floor

Evaluation and conclusions:

Electrical and Instrument

Calibration and verification of electrical and instrumentation could be conducted and reported as internal planning Y2021.

Preventive maintenance could be conducted and reported as internal period.

Permit To Work system had been maintained for respective activities include for subcontractor(s).

Mechanical - Rotary

Preventive maintenance performance need to improved refers to latest Key Performance Indicator achievement report Y2021.



Site review at workshop

Inspection of machines and working tools had been conducted prior usage in daily bases.

Personal protective equipment had been consistently implemented during working as internal requirements.

Areas for attention:

See finding log.

Assessment of:	Logistic (Warehousing) & Distribution	Assessor:	Laksono Purnomo
Auditee(s):	Imam Subhi ; Adi Umar ; Kartika ; Erliss		

Audit trails and sources of evidence:

Warehouse (Logistic):

- Raw Material (storage tank) ; Molases (Tetes) Receiving

Traffic management

Transporter by 3rd party ; Specific safety requirements - inspection check by security (08-10-2021 No Pol B9703TYT ; Safety rules ; Documents ; Transporter inspection ; emergency facility) ; PPE driver ; vendor performance evaluation

Transfer raw material ; PPE ; Storage tanks (18 units) ; Tank Inspection by maintenance ; Daily Inspection (Stock Opname) - Worksheet on 08-10-2021 ; Working at height (hand rail fence)

Site review at storage tanks ; receiving transporter ; plat form un-loading ; wheel cock system

Emergency facilities ; hydrant installation

- Supporting material (Chemical liquid and powder)

Hazardous characteristic ; Corrosive chemicals ; Irritant chemicals ; symbol and label ; storage tank (closed system) ; emergency eyes shower ; PPE

Chemical liquid ; pail and storage tank ; stacking system drum

Powder chemical ; bags and pail ; dust exposure ; **Ergonomic (manual handling)** ; socialization ; lifting (hand pallet ; inspection internal daily - period August 2021)

- Finished Goods (Storage tank)

Ethanol product ; Daily stock opname ; Safety Patrol Weekly (Period September 2021)

Site review ; hand rail and fence ; flammable signage area ; pump house

- Spare part and consumable include oil and paint storage

Racking system ; lighting ; safety line ; restricted area accesses ; safety signage ; fire extinguisher



Distribution

- Filling station area and transporter (trucking)

Site review :

Prevention of accident and work related illness

Loading/transfer processes ; grounding and bonding installation (inspection by maintenance) ; wheel cock ; PPE

Transporter Inspection (Kontrol Filling Tangki) on 27-09-2021 for Vehicle N 9050 UG; Emergency facilities ;

Saringan Knalpot (flame arrester) ; Checklist Perlengkapan Kendaraan Point No.7 Tools Kendaraan - Filter Knalpot

Ergonomic (manual handling) ; Filling product (Container @ 200 litres) ; PPE

Emergency facility ; Hydrant installation ; Sprinkler : Fire extinguisher

Evaluation and conclusions:

Based on documented information and site review generally processes and activities could be concluded :

Logistic

- Transporter inspection had been provided for raw material incoming by security.
- Raw material storage areas were inspected in daily bases through daily stock opname including safety aspects.
- Chemical storage system could be safely maintained as internal requirements.
- Racking storage system could be safely maintained as internal requirements.
- Emergency facilities were provided at respective areas.

Distribution

- Filling station operational controls have been provided as internal requirements.
- Transporter inspection had been conducted as internal requirements.

Areas for attention:

Logistic

- Ergonomic (manual handling) could be considered for further assessment to ensure the control adequacy related powder chemical handling at chemical warehouse.
- Additional notes of safety aspect could be considered in the Daily Worksheet Stock Opname to ensure safety inspection coverage i.e. related Note spillage at tank, valve and manhole as part prevention fire accident.
- Safety accesses could be provided at Ethanol storage tank area and pump station to support activities by personnel as part prevention of accident.

Distribution

Ergonomic (manual handling) could be considered for further assessment to ensure the control adequacy related product filling drum @200 litres lifting to trucking.

04. Next visit details

Theme(s) for Next Visit

Compliance assessment

Standard(s) / Scheme(s)	ISO 45001:2018	Visit type		Certificate Renewal	
Audit days	6.00 DAY	Due date		January, 2022	
Team	LPZ				
Site		Audit days	Delivery Method	Remote Effort	Activity codes
Jl. Sumber Waras No. 255,Malang,ID		6.00 DAY	Onsite	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	7 Oct 2021	TBA
End Date	30 Jan 2019	15 Nov 2019	15 May 2020	20 Nov 2020	28 May 2021	8 Oct 2021	
Audit Days	6	2	2	2	2+1	2	6
Any change in workforce numbers that may impact visit duration (if yes add new number)	N	N	N	N	N	N	Y/N
Process / aspect / location							
Opening meeting	√	√	R	R	R	R	√
Closing meeting	√	√	R	R	R	R	√
Changes to organizational context	√	√	R	R	R	R	√
Management Review	√	√	R	R	R	R	√
Internal Audits	√	√	R	R	R	R	√
Continual Improvement	√	√	R	R	R	R	√
Management of change	√	√	R	R	R	R	√
Corrective action	√	√	R	R	R	R	√
Preventive action	√	√	R	R	R	R	√
Complaint Management	√	√	R	R	R	R	√
Use of Logo	√						√
Performance against the client management system objective	√	√	R	R	R	R	√
Shift coverage outside working hours					R		√
Legal compliance and the evaluation	√	√	R		R	R	√
Objective and programme	√	√	R	R	R	R	√
Communication, participation and consultation	√	√	R	R	R	R	√
Incident Investigation	√		R	R	R	R	√
Hazard identification, risk assessment and determining control	√	√	R	R		R	√
HRD (Competence, training and awareness); Resource roles and responsibility	√	√	R				√
Emergency preparedness and response	√	√	R	R		R	√
Performance measurement and monitoring	√		R	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)	√		R			R	√
Distribution - Filling station area - Spare part						R	√
Utilities : - Cooling system - Boiler, Generator - Coal stock pile, Crusher - Power Plant	√	√			R		√
Maintenance : - Mechanical - Rotary - Electrical and Instrument - Workshop – Static - Engineering (Inspection & Calibration)	√	√				R	√
Transport (Trucking)	√					R	√
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.

(7 October 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)

09.30 Discussion of all outstanding issues from previous visits.

Management elements

12.00 Lunch.

13.00 Warehouse (Logistic):
- Raw Material (storage tank)
- Supporting material
- Finished Goods (storage tank)
- Filling station area
- Spare part

14.30 Transport (Trucking)

16.00 Report writing.

17.00 Close.

(8 October 2021 Day 2)

09.00 Maintenance
- Mechanical - Rotary
- Electrical and Instrument
- Workshop - Static

12.00 Lunch

13.00 Certificate renewal planning discussion

14.00 Review of day's findings

14.30 Preparation of final report

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

CERTIFICATE RENEWAL PLANNING

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.		
	LRQA team briefing for a team of two or more assessors or (experts).		
Auditor 1 (Team Lead)		Auditor 2	
09.30	Discussion with top Management		
10.00	Context of the organization Leadership	10.00	Communication, Worker participation and consultation Documented information Improvement, Incident Investigation, Non Conformance and Corrective actions
12.00	Lunch	12.00	Lunch
13.00	Planning Action addresses to risks and opportunities HIRADC	13.00	Resources, roles, responsibility, authority and accountability with Competence and awareness (HRD)
14.30	Legal and other requirements Objectives, targets and programs Performance monitoring and measurement	14.30	Emergency preparedness and response including site review emergency facilities
15.00-16.00	Report writing		
16.00	End of day 1 assessment		

Day 2 :			
08.00	After/change shifts Ethanol Production Storage Tank	09.00	Utility - Cooling system - Boiler, Generator - Coal stock pile, Crusher - Power Plant
12.00	Lunch		
13.00	Main laboratory Transport (Trucking) Warehouse (Logistic)	13.00	Maintenance (Mechanic, Electrical & Instrumentation) & Workshop Permit to work LOTO Engineering (Inspection & Calibration)
15.00	Report Writing		
16.00	End of day 2 assessment		



Day 3			
<Assessor 1>(Team Leader)		<Assessor 2>(Member)	
09.00	Purchasing and contractor management (CSMS)	09.00	General Area : <ul style="list-style-type: none">- Office- First Aid Room- Clinic include MCU Report- Canteen- Security- Parking areas- Company transport
12.00	Lunch	12.00	Lunch
13.00	Report Writing		
15.00	Closing meeting with management to present a summary of findings and recommendation		
16.00	End of certificate renewal		

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