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Register

## Focus Visit, Surveillance 4

Report for:

# PT Molindo Raya Industrial

<b>LR reference:</b>	JKT6004111 / 3444202
<b>Assessment dates:</b>	02-November-2020 - 03-November-2020
<b>Reporting date:</b>	06-November-2020
<b>Client address:</b>	Jl. Sumber Waras No.255,Lawang,Malang, East Java ,ID
<b>Assessment criteria:</b>	ISO 9001:2015
<b>Assessment team:</b>	Mochamad Iqbal
<b>LR Client Facing Office:</b>	JKT Indonesia OU

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### Attachments:

JKT6004111\_APP\_\_QMS\_SV45\_MIX1.doc

### This report was presented to and accepted by:

**Name:** Mrs Erliess S.

**Job title:** QA Manager

## 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 visit was to assess the compliance of the management system of PT. FMC Agricultural Manufacturing against ISO 9001:2015 as defined in the audit planning documentation. The outcome of the visit is recorded below.

The 5h surveillance assessment had been completed in one man day of assessment work. Despite of there was no Major, neither Minor NC, some opportunities for improvement were highlighted during this visit. Generally, quality system has been implemented in this organisation at all level function. Therefore the organisation was still recommended to maintain ISO 9001:2015 Certification.

### Continual improvement:

Corrective action was done for any nonconformity identified by the company during internal audit to improve their system implementation. Management Review Meeting has been done periodically as part of management system agenda.



### Areas for senior management attention:

No specific area to be concern for top management, however several note for improvement need to be concern regarding safety awareness. See bold character in process `table

## 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.

<b>Reference number</b>	2764942_JKAMIX01	<b>Assessment Criteria (Clause)</b>	ISO 9001:2015 ( 6.1 )
<b>Grade</b>	Minor NC	<b>Issue Date</b>	06-November-2019
<b>Status</b>	Closed	<b>Process / Aspect</b>	update risk and opportunites
<b>Location(s)</b>	Jl. Sumber Waras No.255,Malang, East Java,ID		
<b>Statement of Non Conformity</b>	Risk not updated as per actual conditio		
<b>Requirement</b>	ISO 9001: clause 6.1.		
<b>Evidence</b>	It was found that risk an opportunities not updated per actual condition even there is changes going on for new boiler established in the plant.		
<b>Proposed correction, corrective action and timescales</b>	C: update risk and opportunity CA, review the management system changes procedure TS. A week after audit		
<b>Correction</b>	Risk and opportunities have been updated for 2020 in Jan 2020		
<b>Root Cause analysis</b>	Miss identification from the staff		
<b>Corrective action</b>	Review management system procedure has been taken for management of changes.		
<b>LR has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>	03-November-2020	

### 03. Assessment summary

#### Visit generic objective:

This was a Focus Visit, 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:

Mrs. Erlies

Mrs. Kartika

Mr. Umar

Mr Hadi

Mr. Yudi

Mr. Indrayanto

All attended in the opening meeting at 09.00 am and closing at 16.30 pm

#### Visit specific objective:

Focus Visit

#### Introduction:

The company continue maintaining the Quality Management System in accordance with the requirements of ISO 9001:2015. The overall system matured and it is recommended to be continued their certification approval and subject to entry to certificate renewal.

<b>Assessment of:</b>	Management Elements	<b>Auditee(s):</b>	Mrs Erlies and Mrs Kartika	<b>Assessor:</b>	Mochamad Iqbal
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### 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:

All mandatory elements were reviewed (Organisation structure, management review, continual improvement, internal audit, corrective actions/preventive actions, logo's, customer feed back, etc. The management reviewed was held on July 2020. IQA was held on JUNE 2020. The customer complaints were properly handled. Other aspect was meeting the ISO 9001 requirements.

Risk and opportunities, internal and external issue, usage of logo also reviewed and found to be in order.

Context organization has been determined by organization. Internal and external issue were identified. Interested party were determined and documented. Risk and opportunity that relevant to organization and its issue were determined. Action to address risk and opportunity were determined. Commitment and leadership of Top Man has shown and demonstrated through establishment of policy; communication and focus to customer requirement. Planning to address risk and opportunity were done by establishing quality objective; action plan and management of change in case any changes on system. Quality objective was controlled; any discrepancy found but corrective action made.

### Areas for attention:

None

<b>Assessment of:</b>	Focus Or Certificate Renewal Planning Visit	<b>Auditee(s):</b>	Mrs Kartika	<b>Assessor:</b>	Mochamad Iqbal
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### Audit trails and sources of evidence:

#### Review:

Organisational changes; trends in customer satisfaction; complaints and other performance indicators, changes in the documented system; improvement projects; trends in raised non conformities during internal and external audits, quality of management reviews.

#### Preview:

Developments in the organisation and its environment; strategy, policy and objectives in relation to these developments; the adequacy of the management system.

#### Planning:

Need for an additional visit (additional stage 1), points of attention during certificate renewal, appropriate audit themes; desirability specialised assessors; agreements on reporting, site visits, etc.

### Evaluation and conclusions:

#### Review:

No Organisational changes; trends in customer satisfaction still good; limited complaints since 3 years ago and other performance indicators, No changes in the documented system; improvement projects were guide from FMC corporate; limited non conformities found during internal and external audits, quality of management reviews showing management commitment.

#### Preview

: Developments in the organisation and its environment; strategy, policy and objectives in relation to these developments; the adequacy of the management system. Always taken properly as the strategy laid down from corporate head office.

#### Planning:

Need for Certificate renewal will be taken for 5 mandays , etc.

### Areas for attention:

None

<b>Assessment of:</b>	Production and QC	<b>Auditee(s):</b>	Mr Indrayanto, Ms Anna and Mr Kartika	<b>Assessor:</b>	Mochamad Iqbal
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### Audit trails and sources of evidence:

Risk and opportunities 2020

Standard operation procedure / COA / Spec product ethanol / Product anhydrous ethanol

- Calibration program
- Process flow diagram
- Production log sheet and instruction (PRO-IK-01/10)
- Worksheet yeast crown / distillation worksheet (PRO-PO-2) /

Parameter Process and records in Production

Specification of product and material

Records of inspection, Material and product

Quality Objective and monitoring

Certificate of analysis

### Evaluation and conclusions:

Risk and opportunities have been identified and register, the action plan also monitored very well by the staff and management

Quality objective were achieve well until April 2018

Production and QC activity performance were conducted very good, no complaint received from the customer, no significant issue regarding productivity.

From previous visit there is no issue to be follow up.

Based on sample taken there is one finding to be highlighted as minor NC

### Areas for attention:

It could be consider to be proactive for monitoring the project that involving production function especially related to production capacity



<b>Assessment of:</b>	Sales, Delivery and FG warehouse	<b>Auditee(s):</b>	Mr Andreas, Mr Yudhi, Mr	<b>Assessor:</b>	Mochamad Iqbal
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### Audit trails and sources of evidence:

Risk and opportunities 2020  
 Sales report 2020  
 Sales visit 2020  
 Quality objective 2020  
 delivery report for 2020  
 delivery plan for 2020  
 stock opname 2020  
 legal requirement for delivery  
 Maintenance report 2020

### Evaluation and conclusions:

Based on sample taken for function audited, it can be conclude hat the quality management system were maintain well. There is no negative issue finding to be reported only several note for improvement were identified during the audit.

Risk and opportunities have been updated as actual condition facing COVID pandemic issue

Quality objective also reported to management in periodic time

delivery to customer were find in good performance

Selection and evaluation of supplier were taken properly

Maintenance also done based on program and no significant issue to be highlighted

However several note for improvement were given as below.

### Areas for attention:

It could be consider to crate the list of new potential customer for easily follow up by sales function

Risk for delivery need to involved the transporter that outsource to external party especially for legal aspect, and it needs to cover in the evaluation parameter that conduct periodically

#### 04. Next visit details

Standard(s) / Scheme(s)	ISO 9001:2015	Visit type		Certificate Renewal	
Audit days	5.00 DAY	Due date		February, 2021	
Team					
Site		Audit days	Delivery Method	Remote Effort	Activity codes
Jl. Sumber Waras No.255,Malang, East Java,ID		5.0 DAY	Onsite	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		SV45	Certificate Renewal
Due Date		May 18	Nov 18	May 19	Nov 19		Dec 20	May 21
Start Date		7 May 18	12/11/18	TBA	TBA		2/11/20	TBA
End Date		9 May 18	12/11/18	TBA	TBA		3/11/20	TBA
Audit Days		1	1	1	1		2	4
Separate assessment plan?		Y/N	Y/N	Y/N	Y/N		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	N	Y/N
Where identified above see separate current assessment plan for further detail.								
<b>Process / aspect / theme / location</b>								
<i>Final selection will be determined after review of management elements and actual performance</i>								
Opening meeting		✓	✓	✓	✓	✓	✓	✓
Closing meeting		✓	✓	✓	✓	✓	✓	✓
Changes to organizational context <sup>(2)</sup>		✓	✓	✓	✓	✓	✓	✓
Management Review		✓	✓	✓	✓	✓	✓	✓
Internal Audits		✓	✓	✓	✓	✓	✓	✓
Continual Improvement		✓	✓	✓	✓	✓	✓	✓
Management of change		✓	✓	✓	✓	✓	✓	✓
Corrective action		✓	✓	✓	✓	✓	✓	✓
Preventive Action <sup>(3)</sup>		✓	✓	✓	✓	✓	✓	✓
Complaint Management		✓	✓	✓	✓	✓	✓	✓
Use of Logo (LRQA & Accreditation Marks)		✓	✓	✓	✓	✓	✓	✓
Performance against the client management system objective		✓	✓	✓	✓	✓	✓	✓
<sup>(1)</sup>		✓						
		✓						
Sales and Adm. sales Incl. FG and Delivery/Logistic		✓		✓			✓	✓
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

## 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 Mandatory elements
- 10.30 Production
- 12.00 Lunch
- 13.00 QC
- 15.30 Calibration
- 16.00 Preparation of final report
- 16.30 Closing meeting with management to present a summary of findings and recommendations.

(Day 2)

- 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 Maintenance
- 10.30 Sales delivery FG
- 12.00 Lunch
- 13.00 reporting
- 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](http://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

<b>LRQA Report considerations</b>		
Have there been any deviation from the original assessment plan:	<del>Yes</del> /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:	<del>Yes</del> /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:	<del>Yes</del> /No	If yes detail these within the executive summary section of the report
Have any unresolved issues been identified during the assessment:	<del>Yes</del> /No	If yes detail these within the executive summary section of the report
Was the audit undertaken a combined or integrated audit:	<del>Yes</del> /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:	<del>Yes</del> /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:,	<del>Yes</del> /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:	<del>Yes</del> /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:	<del>Yes</del> /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:	<del>Yes</del> /No	If no detail the reasons and any necessary actions in the executive summary of the report and amend/update the APP