



Lloyd's  
Register

## Surveillance 1

Report for:

# PT Molindo Raya Industrial

<b>LR reference:</b>	JKT6015008 / 3136134
<b>Assessment dates:</b>	14-November-2019 - 15-November-2019
<b>Reporting date:</b>	15-November-2019
<b>Client address:</b>	Jl. Sumber Waras No. 255, Lawang, Malang , ID
<b>Assessment criteria:</b>	OHSAS 18001:2007
<b>Assessment team:</b>	Hartono, Sugeng
<b>LR Client Facing Office:</b>	JKT Indonesia OU

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### Attachments:

JKT6015008\_APP\_AP Sv1 OHS.doc  
JKT6015008\_RC\_SV1\_OHS\_SH.doc

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

**Name:** Ms. Erlies Sartini  
**Job title:** Management Representative



## 01. Executive report

### Assessment outcome:

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.

Although there were findings on this audit, the findings were minor findings.  
In general, organizations have been able to demonstrate fulfilment to standard.

### Continual improvement:

Improvement can be found by activities of measuring quality objectives, correcting audit results, analysis of data, internal audit, and corrective actions and management review. Including Corrective action to finding from last visit had been done.



### Areas for senior management attention:

Please ensure consistence to make incident report.

## 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>	879872_JKASHS01	<b>Assessment Criteria (Clause)</b>	OHSAS 18001:2007 ( 4.3.1 )
<b>Grade</b>	Minor NC	<b>Issue Date</b>	08-August-2018
<b>Status</b>	Closed	<b>Process / Aspect</b>	HIRADC Area "Parkir Depan"
<b>Location(s)</b>	Jl. Sumber Waras No. 255,Malang,ID		
<b>Statement of Non Conformity</b>	Found no HIRADC in the "front parking" area. The potential of risk is from traffic movement		
<b>Requirement</b>	Clause 4.3.1 Hazard identification, risk assessment and determining controls		
<b>Evidence</b>	There is no evidence of HIRADC regarding traffic movement at "Parkir Depan"		
<b>Proposed correction, corrective action and timescales</b>	Company will make HIRADC. Timescale : end of August 2018		
<b>Correction</b>	<p>Hazard Identification and Risk Assessment had been done. However Control not sufficient. In general Risk according to a man hit by heavy movement truck was not yet well controlled. Sign had been seen. However only Assembly point, Parking Direction. In fact; the movement of man still having risk to be hit by heavy truck (Example there was no pedestrian). Company need to do more corrective action and be verified at next audit.</p> <p>The company has made Procedure of parking INF/IK-03/04 for vehicle control. Pedestrian already created.</p>		
<b>Root Cause analysis</b>			



**Root Cause analysis**

HIRADC had been demonstrated.

**Corrective action**

Finding can be closed. The corrective action had been done with effective.

**LR has reviewed and verified the implementation of actions taken.**

**Date of closure**

14-November-2019

<b>Reference number</b>	2274760_JKACBX01	<b>Assessment Criteria (Clause)</b>	OHSAS 18001:2007 ( 4.3.3 )
<b>Grade</b>	Minor NC	<b>Issue Date</b>	30-January-2019
<b>Status</b>	Open	<b>Process / Aspect</b>	Mandatory Element
<b>Location(s)</b>	Jl. Sumber Waras No. 255,Malang,ID		
<b>Statement of Non Conformity</b>	The Objective and target has not been set to drive the improvement on safety and health at each department. The existing target only for accident which is already achieved for man years and also it is target address to K3L department only.		
<b>Requirement</b>	OHSAS 18001:2007		
<b>Evidence</b>	Audit at each department		
<b>Proposed correction, corrective action and timescales</b>	To established improvement target and cascade to relevant department		
<b>Correction</b>	There are already objectives and targets in each department. But only called zero accident and zero illness. There are no objectives that contain the relevance of departmental activities related to safety and health.		
<b>Root Cause analysis</b>	.		
<b>Corrective action</b>	Finding still open		
<b>LR has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		



<b>Reference number</b>	2274760_JKACBX02	<b>Assessment Criteria (Clause)</b>	OHSAS 18001:2007 ( 4.4.6 )
<b>Grade</b>	Minor NC	<b>Issue Date</b>	30-January-2019
<b>Status</b>	Closed	<b>Process / Aspect</b>	Contractor and Supplier (Work Permit and inspection)
<b>Location(s)</b>	Jl. Sumber Waras No. 255,Malang,ID		
<b>Statement of Non Conformity</b>	<p>Some weakness were identify on work permit system :</p> <p>a. The work permit has not been made specific for high hazard work ( hot work, confine space, working at height, etc). Therefore, the welding work on 28 January 2019 by contractor PT. Duta Amana Persada has no requirements for fire extinguisher, monitoring the flammable gas, etc.</p> <p>b. during audit at production, it was observed un used vessel has no control of access for confined space and the main hole was open.</p> <p>c. It was observed the subcontractor Building Work (CV Lumayan Jaya), there was no permit posted at location and the scaffolding has not identify whether already inspected or not. It was observed one out of three operator did not properly use the safety harness.</p> <p>The inspection of incoming truck has a weakness :</p> <p>a. The incoming truck inspection has no clear criteria to make decision whether the truck allow to enter and who is authorised to give a waiver if identify the discrepancy.</p> <p>b. No inspection on fence system on ethanol truck which is the height about 3 meter. During audit, it was observed one employee checking the main hole above the truck due to the hydraulic system for the fence of Sinarjaya Intimperkasa could not be operated.</p>		
<b>Requirement</b>	OHSAS 18001:2007		
<b>Evidence</b>	Reviewing the work permit document and during site visit		
<b>Proposed correction, corrective action and timescales</b>	To improve the system for work permit		
<b>Correction</b>	Dangerous Work Procedures related to permits have been revised. The latest is SHE / P-02 March 2019. Among the new provisions are the need for JSA and joint assessment of the control plan.		
<b>Root Cause analysis</b>	By revising the procedure, root cause solved.		

<b>Corrective action</b>	Finding closed. Corrective action found effective.	
<b>LR has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>	14-November-2019

<b>Reference number</b>	2274760_JKACBX03	<b>Assessment Criteria (Clause)</b>	OHSAS 18001:2007 ( 4.4.6 )
<b>Grade</b>	Minor NC	<b>Issue Date</b>	30-January-2019
<b>Status</b>	Open	<b>Process / Aspect</b>	Operational Control
<b>Location(s)</b>	Jl. Sumber Waras No. 255,Malang,ID		
<b>Statement of Non Conformity</b>	<p>Some weakness were identify during tour at production and logistic:</p> <ul style="list-style-type: none"> <li>a. At Pembibitan area found the rotating belt of pump has no proper guarding. Also the platform into valve has no fence.</li> <li>b. At propagator area (pH 4) has no emergency shower facilities</li> <li>c. The valve for secondary containment located at risky area and may cause people would reluctant to consistently closing the valve and therefore potentially cause the bund wall is not effective.</li> <li>d. Two out of six pump of product ethanol tank has not grounding system</li> <li>e. The product storage secondary containment need to be review in term of the height of wall which is seem low at some location considering the contour and also it was found the outlet into river without any valve.</li> </ul>		
<b>Requirement</b>	OHSAS 18001:2007		
<b>Evidence</b>	During tour at Production and Logistic		
<b>Proposed correction, corrective action and timescales</b>	To improve the facilities accordingly		
<b>Correction</b>	<p>Finding still open.</p> <p>The NC of</p> <ul style="list-style-type: none"> <li>-The product storage secondary containment need to be review in term of the height of wall which is seem low at some location considering the contour and also it was found the outlet into river without any valve.</li> </ul>		
<b>Root Cause analysis</b>	.		





<b>Corrective action</b>	Finding can not be closed.	
<b>LR has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>	

<b>Reference number</b>	2274760_JKACBX04	<b>Assessment Criteria (Clause)</b>	OHSAS 18001:2007 ( 4.4.2 )
<b>Grade</b>	Minor NC	<b>Issue Date</b>	30-January-2019
<b>Status</b>	Closed	<b>Process / Aspect</b>	HRD
<b>Location(s)</b>	Jl. Sumber Waras No. 255,Malang,ID		
<b>Statement of Non Conformity</b>	<p>The competency has not been made in line with the result of risk assessment. Such as the production operator has not been identify on job profile to be trained on working at height, work permit system, etc. Further, the competency has not been evaluated properly, i.e. :</p> <ol style="list-style-type: none"> <li>1. Job Profile for Warehouse operator has not been identify yet</li> <li>2. Production and laboratory Employee review during audit has not been fulfil the job profile training requirement but has not determined the follow up action</li> <li>3. Year 2018 training has not been properly implemented. Only about 30 % out of training program was implemented.</li> </ol>		
<b>Requirement</b>	OHSAS 18001:2007		
<b>Evidence</b>	Training and job profile records		
<b>Proposed correction, corrective action and timescales</b>	To determine jo profile in line with HIRA and evaluated the gap need to be followed up		
<b>Correction</b>	<p>Job Profile for Warehouse operator and Electircian has been identified yet</p> <p>The focus on SAP; However from December 2019</p> <p>Job profile and review on safety competency already exists. Training schedule for 2019 has been fulfilled.</p> <p>Example Job Profile for Warehouse operator and Electrical staff.</p>		
<b>Root Cause analysis</b>	Root cause : The job profile not specific.		
<b>Corrective action</b>	Finding can be closed. The corrective found effective.		
<b>LR has reviewed and verified the</b>	<b>Date of closure</b>	14-November-2019	

implementation of actions taken.

<b>Reference number</b>	2274760_JKASHS01	<b>Assessment Criteria (Clause)</b>	OHSAS 18001:2007 ( 4.4.7 )
<b>Grade</b>	Minor NC	<b>Issue Date</b>	29-January-2019
<b>Status</b>	Closed	<b>Process / Aspect</b>	Emergency preparedness
<b>Location(s)</b>	Jl. Sumber Waras No. 255,Malang,ID		
<b>Statement of Non Conformity</b>	In the workshop the static was found to be unclear about the evacuation route. In the direction specified, there are many obstacles, in the form of work tools and materials. For example grinding, welding and material. This will hinder the evacuation process and potentially cause tripping or getting hit.		
<b>Requirement</b>	Clause 4.4.7		
<b>Evidence</b>	Site visit to Workshop Static		
<b>Proposed correction, corrective action and timescales</b>	Evacuation routes will be cleared of obstructions and clarified. Time scale : end of January 2019.		
<b>Correction</b>	Corrective action had been done.		
<b>Root Cause analysis</b>	Root cause had been solved.		
<b>Corrective action</b>	Corrective action found effective. Finding closed.		
<b>LR has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>	14-November-2019	

<b>Reference number</b>	3136134_JKASHS01	<b>Assessment Criteria (Clause)</b>	OHSAS 18001:2007 ( 4.5.3 )
<b>Grade</b>	Minor NC	<b>Issue Date</b>	14-November-2019
<b>Status</b>	New	<b>Process / Aspect</b>	Incident investigation
<b>Location(s)</b>	Jl. Sumber Waras No. 255,Malang,ID		
<b>Statement of Non Conformity</b>	At the time of the site visit to area front parking, there was a collapsed iron fence pedestrian. It was told by PIC that the pole collapsed because it was hit by a truck. After the interview, there were no incident reports.		
<b>Requirement</b>	Clause 4.5.3		
<b>Evidence</b>	Site visit		
<b>Proposed correction, corrective action and timescales</b>	Report will be made including investigation to find root cause and corrective action. Time : 16 Nov 2019.		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LR has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		

### 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:

Opening meeting 14 Nov 2019 time : 08.00

Closing meeting 15 Nov 2019 time : 17.00

Attendance :

Opening and closing meeting attended by top management, MR, and relevant manager/staff :

-Ms. Erlis (MR and representing top management);

The management legally responsible for occupational health and safety);

-Mr. Umar; -Ms. Kartika; -Mr. Joko; -Mr. Eko

#### Visit specific objective:

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#### Introduction:

The following is an assessment report. Summary of this report has been explained in the closing meeting held after the assessment.

The Assessment is based on a sampling process of the available information.

Every evaluation and conclusion are based on sampling/evidence taken/shown during audit day.

<b>Assessment of:</b>	Please see audit area	<b>Auditee(s):</b>	-Ms. Erlis -Mr. Umar -Ms. Kartika -Mr. Joko -Mr. Eko	<b>Assessor:</b>	Hartono, Sugeng
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### Audit trails and sources of evidence:

Audit area :

Verification at last audit

Mandatory Element

Legal compliance and the evaluation

Objective and programme

Communication, participation and consultation

Incident Investigation

Hazard identification, risk assessment and determining control

HRD (Competence, training and awareness); Resource roles and responsibility

Emergency preparedness and response

Utilities :

Maintenance :

Internal audit 22-29 May 2019

Management review 11 January 2019

Emergency simulation 3 Oct 2019

Daftar Pemeriksaan Hydran

Lift Certificate : 566/387/Elevator/108-5-Mlg/VIII/2018

Checklist Fire Extinguisher.

Safety Patrol Checklist

Zero accident in category "besar" dan "kecil"

### Evaluation and conclusions:

Verification at last audit : Please See Finding Log

Mandatory Element : Management Review had been done properly and had been resulted relevant recommendation. Internal Audits had been done in order. Beside of internal audit, organization also done safety patrol . All of activities had been in accordance with procedure. Corrective action, and Continual Improvement had been demonstrated, example by giving action to result of audit and patrol. Complaint Management – As explain by auditee : No complaint received. Using of LRQA logo had been in accordance with guidance.

Legal compliance and the evaluation : Legal and other requirements had been accessed and the compliance had

been evaluated.

Objective and programme : Had been set for company. But need improvement for department. Please refer finding log.

Communication, participation and consultation : Communication and participation and consultation internally had been made by tool box meeting. Externally had been demonstrated by induction meeting, and communication with government by P2K3 report.

Incident Investigation : reported no incident. Please refer finding log.

Hazard identification, risk assessment and determining control : HIRADC had been review and updated.

HRD (Competence, training and awareness); Resource roles and responsibility : Found improved. Please refer also to Finding log (closed finding).

Emergency preparedness and response : Emergency preparedness and response had been demonstrated by showing completeness checking for : APAR, Hydran, Alarm and doing drill/simulation.

Site tour to Utilities and Maintenance :In general safety hazard and risk had been identified and the control had been defined. Instruction and direction or other information related with safety available.  
Emergency respond had been prepared such as evacuation plan, Fire Extinguisher, Alarm, and Hydrant. People using relevant PPE such as helmet, safety shoes etc. Awareness and competency of people had been well demonstrated.

### Areas for attention:

Opportunity for improvement :

- # Please consider there always a security to be traffic officer for large vehicles
- # Please consider if the need for SO written information is addressed to procurement.
- #There should be a checklist that proves that in carrying out internal audit procedures have been accessed by the auditor.
- #Parameter of successful participation should be there.
- #Please Review LOTO procedure
- #Please explore identification

New Minor Finding :

- #No accident report (fence hit by truck)

#### 04. Next visit details

<b>Standard(s) / Scheme(s)</b>	OHSAS 18001:2007	<b>Visit type</b>	Surveillance 2
<b>Audit days</b>	2.00 DAY	<b>Due date</b>	February, 2020
<b>Team</b>			
<b>Site</b>		<b>Audit days</b>	<b>Activity codes</b>
Jl. Sumber Waras No. 255,Malang,ID		2.00 DAY	066503

## 05. Appendix





## 1. Audit Programme/Plan

Visit Type	CR	SV1	SV2	SV3	SV4	SV5		CR Visit
Due Date	Feb 2019	Aug /2019	Feb 2020	Aug 2020				Feb 2021
Start Date	27 Jan 2019	14 Nov 2019						
End Date	30 Jan 2019	15 Nov 2019						
Audit Days	6	2	2	2	2	2		6
Any change in workforce numbers that may impact visit duration (if yes add new number)	N	N	Y/N	Y/N	Y/N	Y/N		Y/N
Process / aspect / location	<b>Final selection of the activities to be audited during the current visit will be determined after review of management elements and actual performance</b>							
Management Review	√	√	√	√	√	√		
Internal Audits	√	√	√	√	√	√		
Continual Improvement	√	√	√	√	√	√		
Management of change	√	√	√	√	√	√		
Corrective action	√	√	√	√	√	√		
Preventive action	√	√	√	√	√	√		
Complaint Management	√	√	√	√	√	√		
Use of Logo	√	√	√	√	√	√		
Legal compliance and the evaluation	√	√	√		√			
Objective and programme	√	√	√	√	√			
Communication, participation and consultation	√	√	√		√			
Incident Investigation	√			√	√			
Hazard identification, risk assessment and determining control	√	√	√	√		√		
HRD (Competence, training and awareness); Resource roles and responsibility	√	√	√			√		
Emergency preparedness and response	√	√	√	√		√		
Performance measurement and monitoring	√		√	√		√		
Purchasing and Contractor management (CSMS)	√		√	√		√		
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	√		√			√		



Visit Type	CR	SV1	SV2	SV3	SV4	SV5		CR Visit
- Spare part								
Utilities : - Cooling system - Boiler, Generator - Coal stock pile, Crusher	√	√		√	√			
Maintenance : - Mechanical - Rotary - Electrical and Instrument - Workshop - Static	√	√		√		√		
Transport (Trucking)	√					√		
General Area : - Office - Security - First Aid Room - Company transport	√							

Scope of the management system	Manufacture of Ethanol.
Exclusion	None

**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.

## 1. 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 organization 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 organization 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 organization 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 organization:	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
<b>Additional information</b> <p><b>opportunities for improvement</b> 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.</p> <p><b>Confidentiality</b> 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.</p> <p><b>Sampling</b> 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.</p> <p><b>Legal entity</b> 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.</p>		