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ISO EMS & ENMS

Stage 2 Audit Report

Doc No. F16 Rev. 00

Stage 2 Audit Report of - BARASAT GOVERNMENT COLLEGE

Not Applicable

(A Government college under Higher Education Department, Govt. of W.B.)

WEST BENGAL, INDIA.

Stage2 mandays

princi6sam.bgc672@gmail.com Email-id

Dr. Samar Chattopadhyay Contact Person

9768799321

ISO 14001:2015 ISO Standards

> "PROVISION OF PG AND UG COURSES IN SCIENCE AND HUMANITIES, AFFILIATED TO WEST BENGAL STATE UNIVERSITY AND UGC 2(f) AND 12 (B) RECOGNISED. DEVELOPMENT OF SKILL, STRATEGY, TACTICAL AND CULTURAL ATTRIBUTES THROUGH DIVERSIFIED SEMINARS, CULTURAL PROGRAMS & COMPETITIONS, COLLABORATIVE PROGRAMS, E-MAGAZINES, RESEARCH FACILITIES AND DOCTORAL PROGRAMS, PUBLICATION IN IMPACT FACTOR JOURNALS BY THE FACULTIES AND PG STUDENTS THROUGH PROJECT/DISSERTATION/FIELD VISITS, STATE-OF-THE-ART LABORATORIES AND WELL-EQUIPPED LIBRARIES, INFLIBNET ACCESS, NSS & SOCIAL PLATFORMS, OUTREACH PROGRAMS, GENDER SENSITIZATION (ICC), PSYCHOLOGICAL COUNSELING & SCHOLARSHIP, AND JOS ORIENTED VALUE-MODEDIADO-ON COURSES. EMERGY MUST HAVE OFTIMIZATION, IN-CAMPUS USE OF SOLAR EMERGY AND QUANTIFICATION OF POLLUTION DATA. AND CIVIL SERVICES STUDY, OF

10, K.N.C. ROAD, NORTH 24 PARGANAS, KOLKATA-700124,

Technical Area

Scope

Address

Site Address (If Any)

No Of Employee

(37.3) Higher Education

ADDITIONAL INFORMATION

Has the Internal Audit Programme been Implemented?

How many sites is your company managing at the same time

A register of Significance Environment aspect? Yes An Environmental Management Manual? Yes An Internal Environmental Audit Program? Yes

A. Hussain (LA)/(Auditor)

Witnesser Auditor

Starting Date Of Audit 05/06/2023 End Date Of Audit 06/06/2023

cross-section of urban, sub-urban and rural students. Good connectivity by both rail and road makes it the foremost choice among the students of the district of North 24 Parganas. As a government college it enjoys direct government supervision, support and

Yes

grants. However, the College owes its commencement to the post-partition need to rehabilitate the displaced immigrant population settled there through formal education and subsequent employment. In 1950 the State Government selected the town of Barasat as the location for a new college for this purpose. The College has developed significantly ever since. NAAC re-accredited with 'A' [3.1; 2nd Cycle] DBT BOOST college, DST FIST I&II, RUSA-Academic excellence and research orientation-Imparting need based holistic education-Women's education to keep up the legacy of the town-Learning through the use of modern teaching aids-Uplift of the region and building awareness of the environment. Green campus and secured CCTV surveillance

Barasat Government College was set up in 1950 and has since then catered to a wide

To verify the implementation of the Environmental Manageent System as per the Standards Requirement, verification of records for the conformity of the implementation.

1. Audit will be conducted based on ISO 14001:2015 and the requirements of a defined

normative document on Environmental Management System.

2. The defined processes and documentation of the Environmental Management System

developed by the client.

1. Monitoring of paper wastage need to implement have control.2. Wastage of water avoided in toilets by putting signages.

Brief About Organization

Audit Objective

Audit Criteria

Observations

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Stage 2 Audit Schedule

Meeting Opens 9.00-9.30 Lunch Time 13.00-13.30 Reporting & Closing 17.30 – 18.00

Meeting Opens 9.00-9.30		Lunch Time 1	3.00-13.30	Reporting & Closing 17.30 – 18.00							
S.No.	Time	Function/Process Area (Process Owner)	Applicable Clauses	Team Leader	Auditor 1	Auditor 2	Technical Exp.				
	10.00-10.30 am	Site tour & Previous audit findings (Environmental Manager)		Υ							
2	10.30-11.00 am	Leadership and Top Management (Top Management)	5.1, 5.2, 5.3, 6.2, 10.1, 10.3	Υ							
1	11.00-11.30 am	EMS Documentation (Environmental Manager)	4.1, 4.2, 4.3, 4.4, 5.2, 6.2, 7.5	Υ							
E.	11.30-12.00 pm	Internal Audit and MRM Process (Top management/Environ mental Manager)	9.2, 9.3, 10.2	Y							
5	13.30-15.30 pm	Process for Action Address to Risk & opportunities & Objective Achievement Planning (Environmental Manager)	6.1.1, 6.2.2	Υ							
)	15.30-17.30 pm	Resource Planning & Communication Process (Admin Manager)	7.1, 7.4	Υ							
•	17.30-18.00 pm	Briefing on Day 01 outcomes		Υ							
		Day 02			-		315				
)	9.30-11.30 am	HR Process (HR Manager)	7.1, 7.2, 7.3	Υ							
10	11.30-13.00 pm	Environmental Aspects (Environmental Manager)	6.1.2, 6.1.4	Υ							
11	13.30-15.00 pm	Evaluation of Compliances & Legal Requirement Process (Environmental Manager)		Y							
12	15.00-17.30 pm	Operational Planning & Control Process (Environmental Manager)	8.1, 8.2	Υ							
13		Common Clauses: 5.2, 6.2, 7.2, 7.3, 7.4, 7.5, 8.2 for All above Processes									
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Determination of the organizational context is done as Appendix-I. Rev:00 date of issue 21/01/2023.Internal factors and External factors affecting the business environment are described in the document found satisfactory. Internal factors: Competence Space Values Culture Tools and Equipment technologyadministrationInternal communicationteaching AidsJob security 4.1 Understanding the organization and its context (termination)behaviour of staff Working practicesNatural Recourseswaste generation and waste (Determination of external and Internal Issues) disposalPower supplyAdministration-issue- administration is focused towards the healthy environments within the organization (POSITIVE)External factors:LegalStudentexternal ProviderSecurityTechnologyUGC Emergency controllerExternal AgencyTECHNOLOGY-ISSUE- New and advanced technology. Determination of the interested parties with their needs and expectations is done as Appendix-II, date of issue 21/01/2023 related to the college environment.EMS leader with the Principal monitor and review these interested parties including needs & expectations on half yearly basis.President/ownerCorporateEmployeesStudentNeighbor/communityLocal /county /other legal 4.2 Understanding the needs and expectations of regulator/Education BoardState government/environmental regulator Federal governmentLocal interested parties (Determination, Monitor & emergency responder (fire department/medical responder)SupplierExternal agency Review of the Interested Parties) (calibration)Security Services Maintenance servicesLocal /county /other legal regulator/Education Board- Complies with city/country/UGCLocal emergency responder(fire department/medical responder)- Communicate to all for emergency ,safety plan and maintain proper handling of fire Determination and documentation of the scope of the environment management system is done in EMS manual (EMSM/01, issue 01, date of issue 21/01/2023), section 4.3, Verified Scope:-"PROVISION OF PG AND UG COURSES IN SCIENCE AND HUMANITIES, AFFILIATED TO WEST BENGAL STATE UNIVERSITY AND UGC 2(f) AND 12 (B) RECOGNISED, DEVELOPMENT OF SKILL, STRATEGY, TACTICAL AND CULTURAL ATTRIBUTES THROUGH DIVERSIFIED SEMINARS, CULTURAL PROGRAMS & COMPETITIONS, COLLABORATIVE PROGRAMS, E-MAGAZINES. RESEARCH FACILITIES AND DOCTORAL PROGRAMS, PUBLICATION IN IMPACT 4.3 Determining and maintained as a documented information the scope of the Environmental FACTOR JOURNALS BY THE FACULTIES AND PG STUDENTS THROUGH PROJECT/DISSERTATION/FIELD VISITS. STATE-OF-THE-ART LABORATORIES AND WELLmanagement system (Boundaries and Type of EQUIPPED LIBRARIES, INFLIBNET ACCESS, NSS & SOCIAL PLATFORMS, OUTREACH Product and Services and any requirement not PROGRAMS, GENDER SENSITIZATION (ICC), PSYCHOLOGICAL COUNSELING & applicable) SCHOLARSHIP, AND JOB ORIENTED VALUE-ADDED/ADD-ON COURSES, ENERGY MUST-HAVE OPTIMIZATION, IN-CAMPUS USE OF SOLAR ENERGY AND QUANTIFICATION OF POLLUTION DATA. AND CIVIL SERVICES STUDY, OPEN UNIVERSITY COURSE THROUGH NSOU (PG & UG), AND ADVANCED LEVEL COMPUTER COURSES THROUGH DOEACC". Education activities, support activities and outsourced activities are considered in determining the scope found satisfactory 4.4 Environmental management system and its Established, implemented and maintained the environmental processes and interrelated support processes (Established, Implement and C processes as Appendix-III, date of issue 21/01/2023. Appendix-IV is showing their sequence and maintained, process and Interaction of Process) interaction comprehensively and process-wise. During interviewed the Principal found sound awareness about the EMS standard requirements and committed for its implementation within the organization found ok.MD's commitment is evidenced 5.1 Leadership & Commitment (Statement of via:1. Taking accountability for effectiveness of EMS.2. Establishing environmental policy.3. Establishing environmental objectives.4. Providing adequate resources for effective implementation.5. ensurity) Supervision of the entire management system.6. Chairing the management review meeting.7. Promoting continual improvement Environmental policy found established, documented, implemented and maintained as Appendix-V, 5.2 Environmentalpolicy (Establish, Documented date of issue 21/01/2023 found complying of standard requirements. Policy is communicated by staff training and displaying the policy statement at prominent locations in college premises bilingually, Information, Implement, Maintain, communicated and understood) however teacher replied satisfactory while interviewing about EMS policy. Policy statement verified and found ok. Established the procedure for identification of roles, responsibility, accountability and authority as P-01.Organization chart as Appendix-VI date of issue 21/01/2023 evidenced.Responsibility and authority matrix representing the roles, responsibility and authorities of all the employees as Appendix VII. College staff is communicated by e-mail for their roles, responsibility & authority towards effective

5.3 Organizational roles, responsibilities and

authorities

C

implementation of the management system. Objective evidence verified for EMS Leader as below: -1. Coordinate auditing efforts. 2. Track and analyse new regulations and maintain the library. 3. Obtain

permits and develop compliance plans.4. Prepare reports required by regulations.5. Comply with applicable regulatory requirements.6. Conform to organizational EMS requirements.7. Identify and documented environmental aspects of products, activities or services being provided or rendered.8. Maintain EMS retained documented information as required.9. Communicate importance of environmental management.10. Monitoring of key activities and processes.11. Coordinate emergency

response efforts.12. Train the employees for environment management system.

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6.0 Planning

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Organization has planned as per requirements of the EMS standard.

6.1.1 Actions to address risks and opportunities (Risk Assessment has done with prevention of undesirable effects)

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6.1.2 Determination and maintained documented

information of Environmental Impacts, Criteria used and significant Environmental Aspects of the activity and Environmental Impacts

6.1.3 Determination of the Compliances Obligation and maintained documented information how to C comply.

Risk assessment has been done process & activity-wise with the prevention of undesirable effects as Appendix-VII date of issue 21/01/2023. This assessment is to be reviewed at half yearly basis. Factor-CompetenceExpected result-work force is competent, Uncertainty- existing workforce not trained, Riskmedium, Opportunity- opportunity to train team, Control point- provide training to existing team,

Established the procedure for identification & evaluation of environmental aspects P-02. Established the procedure for review of new processes, activities & materials P-03 date of issue 21/01/2023 verified. Established planning for identification of environmental aspect & impact document as Appendix-IX. Aspect and Impact Register, EAIR-01, documented and maintained having environmental aspects & impacts for all the activities and processes.ACTIVITY-HOUSEKEEPINGPresent Control Measures in Place: To maintain the work area in neat & tidy condition housekeeping is done.SIGNIFICANCE SCORE = SEVERITY FACTOR ? (PROBABILITY FACTOR + CONCERN FACTOR) + (IF LEGAL IMPLICATION IS INVOLVED)ASPECT- Generation of Waste (Housekeeping)CONDITION-NENVIRONMENT IMPACT- Air ContaminationRISK ASSESSMENT-SEVERITY-1PROBABILITY-4CONCERN-1LEGAL IMPLICATION-0SIGNIFICANCE SCORE-5PRESENT CONTROL MEASURE- Housekeeping to be done after spraying water in the area to prevent dust.ACTIVITY-OFFICE WORKPresent Control Measures in Place: HR Department rules and regulations.ASPECT- Use of Printers, Xeroxing and FaxingCONDITION-NENVIRONMENT IMPACT- Depletion of natural resourcesRISK ASSESSMENT-SEVERITY-1PROBABILITY-4CONCERN-0LEGAL IMPLICATION-0SIGNIFICANCE SCORE-4PRESENT CONTROL MEASURE-Printers, Faxes and Xeroxing are to be used in controlled manner. Papers are to be used in controlled manner to prevent unwanted use.

Established the procedure for identification of legal and other requirements as P-04. Established legal and other requirements register L-01, Established compliance monitoring register L-02, Verified:-Affiliated from UNIVERSITY GRANTS COMMISSION (UGC) NEW DELHI-F. No. 8-154/2015 (CPP-1/C). Accreditation from NATIONAL INSTITUTE OF ELECTRONIC AND INFORMATION TECHONOLOGY (NIELIT)- Accreditation Letter No- NIELIT/ACCR-O1558, GST Registration No-19AAAB0594J1DA,Fire Noc: 54756788

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6.1.4 Planning action for Environmental aspect, Compliance Obligation and Risk and Opportunities.	С	Established the procedure for identification of Objectives, targets and programmes P-05.Environment management programme as F-P01 is established by the organization.Environment management programme verified for: -Reduce hazardous healthcare wasteActivity Responsibility TargetBackground Top Management In a monthinformationProblems Principal Within 2 monthsidentificationInterventions EMS leader Next quarterMonitoring EMS leader Continuous
6.2 Environmental objectives and planning to achieve them(Documented, Measurable, Monitored and communicated,	С	Established the procedure for identification of Objectives, targets and programmes- P-05.Established objectives & targets, O/T-01, for all employees defined designation-wise and communicated through external and internal trainings.Employees found aware about their roles & responsibilities towards achieving the objectives assigned to them.Objectives are measurable in nature and to be reviewed in review meeting on half yearly basis.Environment management program are set according to objectives. Objective monitoring sheet, O/T-02, verified.Objective evidence verified below: -1. Conservation of paper 3% as compare red to previous year 2. Training of all staff to improve employee awareness of environmental issues by next quarter.3. Save electricity bill 5 % as compared to previous year.
7.1 Resources (Resource needed for Continual Improvement)	С	Established procedure for identification of resources P-06. Adequate resources are being provided (men, machinery and materials). College has office for administration staff, campus, classroom, toilets, library, laboratory, play ground, meeting room, canteen and other amenities, College also has Fire extinguishers, fire alarm, smoke detector. Safety measure equipment and are adequate. First-aid box available. Security system is well established, Security guard available on entry gate, CCTV camera. Desktop projector available. In the office and classrooms Proper humidity, electricity, lighting, air, space, ventilation are provided. College has specious class rooms with black board, benches and desk (as per no. of students). Canteen is clean and hygienic. R.O water available for drinking purpose. The College has specious class rooms with black board, benches and desk (as per no. of students). Canteen is clean and hygienic. R.O water available. First-aid box available/Calibration records LM-04 verified for: - Equipment-Smoke density meter Calibration agency-Creative Calibration Lab, Gurgaon. Traceability to NABL. Certificate No. 5471578 Calibration date 27/12/2022 Valid for next one year.
7.2 Competence(Employee records & Competence skill matrix)	С	Established the procedure for competence, training and awareness P-07.List of employees F-HR1.Competence matrix F-HR2.Skill matrix F-HR3.Competence criteria verified of:Designation- Assistant ProfessorRequired- PHD and minimum 3 years of teaching experience. Available-B.Ed holder with 5 years of teaching experience.
7.3 Awareness(Environmental Policy, Objectives & Effectiveness of EMS)	С	Training for EMS awareness conducted dated 23/01/2023 to the staff, ensured during interviewing teacher for policy and objectives assigned to his process and his contribution towards achieving them and found satisfactory. EMS Policy is also displayed at appropriate locations in office for better communication. Verified: Training plan and training needs identification documented and maintained. Training need identification F-HR4.Training plan F-HR5.Training records F-HR6. Training record verified below. "Topio- ISO 14001:2015 awareness/Given by external agency, Date-20/04/2023 Attendants- All teaching staff. Training effectiveness dated 20/04/2023 evaluated by Principal found satisfactory.

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7.4 Communication(what, who, when, whom, how) with retained documented information

С

Established the procedure for communication, participation and consultation P-08. Established the procedure for internal communication and communication with external parties P-09.External stakeholder communication record FC-01.Internal communication through signage, notice board etc.Communication with external providers by means of display of environmental policy is done at entrance gate and admin office, class room and canteen. Changes in environmental management system which could affect environmental impacts shall be communicated to interested parties as per procedure, presently no change recorded after system implementation.

7.5 Documented information(External Origin, Creation, Updation, Distribution, Preservation, version control, Retention and disposition)

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Documented information verified below: -Master list of documents, ML/01.Master list of records, ML/02.Interested parties, Appendix-II.Document distribution record, DR-01.Document amendment record. DA-01.List of external origin documents, DO-01.Process flow charts (PF-01), Work instructions (WI-01), Transport and support schedules (SCH-01), Teaching plans (TP-01), Inspection plans (IP-01). Identification of format of the document for suitability & adequacy found documented as per

8.1 Operational planning and control(Plan, Implement and control of process, documented information for process carried our as planned and Conformity of product or services)

requirement.Preparation, Review & Approval of documented information is being done by EMS Leader and Principal.Availability, Protection, Distribution, Storage, retention and disposition found ok as per procedure for control of documents P-10 and procedure for control of

Established the procedure for operational control P-12 and found effective. Operating criteria is defined.IMS Hazards will be identified by college for the purchase of goods & services. For significant, control methods will be established and same will be communicated to concerned suppliers.At security Information on IMS system will be given for the visitors and the supplier visiting to college for the compliance with IMS Established the standard operating procedure for controlling & monitoring of electrical energy SOP-01.Use of electricity SOP-02.College management SOP-03.List of hazardous waste L/HW-01.List of non-hazardous waste L/NW-01.Aspect and Impact Register, EIA-01, having environmental aspects & impacts for all the education activities found effectively implemented. Life cycle prospective verified. Environment instruction board found displayed at appropriate locations. Verified preventive maintenance schedule and breakdown records of machines. Corrective action, F/CA-01, records evidenced, however no actions required and taken for the review period.

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8.2 Emergency Prepared and Responses (Mitigation of Adverse Environmental Impact, Respond to Emergency situation, Periodically review and Training of the Emergency)

Established the procedure for emergency preparedness and response P-13. Emergency preparedness plan F1/EPP.Mock drill report F1/MDR.Emergency preparedness and response requirement matrix F2/MDR.Emergency action plan evidenced as below: -Emergency condition: Fire/ExplosionControl actions with responsibility:Raising emergency alarm (first observer). Shut down machines and main power supply (first observer). Evacuation, Assembly at assembly point (all employees). Fire fighting (all employees). Rescue operation (all employees).- First aid or Hospitalization (all employees).- Final declaration of "All Clear" situation (EMS leader). Training given to the employees for fire fighting, explosion control dated 07/03/2023. Training given by external agency and attended by all the employees. Effectiveness of the training given is evaluated by the Principal through mock drill. Mock drill report evidenced of fire/explosion control dated 22/03/2023 attended by all the employees in which scenario and actions with time frame evident. Effectiveness of mock drill dated 22/03/2023 is verified by Principal through verifying the response timings against set criteria such as assembling time of 3 minutes observed found ok.

9.1.1 Monitoring, Measurement analysis and evaluation

С

С

Established the procedure for performance monitoring and measurement P-14.Objective monitoring chart F/OB-01 verified for the monitoring of EMS objectives.Monitoring of the objectives found evidenced regarding significant impacts, environmental management programme, applicable legal and other requirements, emergency management, corrective action results found satisfactory.

9.1.2 Evaluation Of Compliances Documented (Frequency and Action on Evaluation)

verified Established legal and other requirements register L-01.Affiliated from UNIVERSITY GRANTS COMMISSION (UGC) NEW DELHI-F. No- 8-154/2015 (CPP-1/C). Accreditation from NATIONAL INSTITUTE OF ELECTRONIC AND INFORMATION TECHONOLOGY (NIELIT)- Accreditation Letter No- NIELIT/ACCR-01558, Extended From- 22/12/2020 - Extended up to-21/12/2023.GST Registration No- 19AAAB0594J1DA,Fire Noc: 54756788 (valid for 1 yr)

Verified, Established compliance monitoring register L-02

9.2 Internal Audit(Frequency and Documented Information for Implementation of Audit Program and the audit result)

Established the procedure for Internal audit PR-16.Internal audit plan IA/01,Internal audit schedule IA/02,List of Internal auditors IA/03,Internal audit check list IA/04,Internal audit report IA/05,NC report IA/06.Frequency is six months as per procedure.Internal Audit is done as per audit schedule.Last Internal audit conducted dated 17/05/2023.Internal audit report verified for all processes and departments being audited. Competence of internal auditors checked through their training certificates.Nonconformance report showing 03 minor non conformances. Corrective actions taken and found effective for nonconformances and observations within the time frame provided. Internal environmental audit conducted found

9.3 Management Review (Frequency, Input, Output, Documented Information for MRM Results)

meeting PR-17. Frequency of MRM is half yearly as per procedure. MRM schedule MRM/01MRM notice MRM/02MRM agenda MRM/03Minutes of meeting MRM/04Principal chaired the review meeting and attended by the process owners. Meeting inputs discussed all the

Established the procedure for management review

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points as per standard requirements. MRM conducted found effective. Minutes of the meeting verified dated 25/05/2023. Meeting outputs also documented for further System improvement including correction, corrective action, minutes of meeting and continual improvement 10.1 Improvement - General C found evidenced. Established the procedure for incidents, investigation, nonconformity and corrective action PR-18.Documents and 10.2 Nonconformity and corrective action(Documented Information for nature of NC and result of action records of internal audit non-conformances, corrective taken) actions found ok. Negative effect on aspects not found evident for the corrective actions taken for the NCs. Continual improvement is done through monitoring of EMS objectives, audit results, system process performance 10.3 Continual improvemen monitoring analysis done by the Principal in review

Summary Of Audit Team

Audited Firm

Location

Standard

BARASAT GOVERNMENT COLLEGE

(A Government college under Higher Education Department, Govt. of W.B.)

10, K.N.C. ROAD, NORTH 24 PARGANAS, KOLKATA-WEST BENGAL, INDIA.

ISO 14001:2015

Stage Of Audit

Initial Certification

Recommendation

Issuance of the certificate

Use of the MMS & EGAC Logo as per Guidance for Usage of Logo

Reason

The Environmental Management system complies with the requirements of the referencestandard: Congratulations, on the basis of the above summary, Lead Auditor is pleased to put forward a recommendation Yes for conducting next stage of assessment.

The Environmental Management system complies with the requirements of the reference standard with exception of minor NC: Congratulations, Lead Auditor is pleased to put forward a recommendation for registration of Organization upon off-site verification of closure of all issues within 60 days from the date of Stage 2 audit. Responses to the non-conformances should be submitted to MMS and must include supporting evidence of closure to allow for off - site verification. In responding to the non-conformances, the organization should consider the root cause of the non-conformance and the potential for related issues in other parts of system.

If all non-conformances are not closed within 60 days, a full reassessment may be required.

Evidence of major non conformities: Organization is not recommended for next assessment at this time. A follow-up assessment will be scheduled to allow for on-site verification and closure of all issues within 60 days from the date of Stage 2.Once all non-conformances are closed, the recommendation for registration can be made. Responses to the non-conformances should be submitted to MMS within 45 days and must include supporting evidence. In responding to the non-conformances, the organization should consider the root cause of the non-conformance and the potential for related issues in other parts of system. If all non-conformances are not closed within 60 days, a full reassessment may be required.

Not Recommended: Organization is not recommended for next assessment at this time. A Stage 2 will be required.

To progress your application for registration, please respond to each non-conformances, with a plan showing Recommended proposed actions, timescales and responsibilities for resolution. The organization should consider the root cause of the non-conformance and the potential for related issues in other parts of your system.

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Non Conformities Raised

Minor/Major Non conformance identified in the Stage 2 audit, details of Non Conformance in CAR From (MMSF50)

(Note: the detailed NC is to be submitted and accepted by the client on MMSF50)

Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Team Leader

Major 0 Total CAR - [0]

Minor ⁰

Attachment (Attendance Sheet)

S.No.	Name	designation	Opening Meeting	Closing Meeting
1	Dr. Samar Chattopadhyay	Principal	Υ	Y
2	Dr. Sandeep Kumar	Associate professor	Υ	Y
3	Dr. Balaram Das	Assistant Professor	Υ	Υ
4	Prasanta Paul	Associate professor	Υ	Y
5	Rupak Soha	Assistant Professor	Υ	Y
6	Mihir Halder	Assistant Professor	Υ	Y
7	Debarati Mukhrjee	Librarian Assistant	Υ	Y
8	Soma Sinha	SACT	Υ	Y
9	Sonali Paul	SACT-II	Υ	Y
10	Sarajit Biswas	Assistant Professor	Υ	Y
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Surveillance Audit Schedule

S.No.	Time	Function/Process Area (Process Owner)	Applicable Clauses	Team Leader	Auditor 1	Auditor 2	Technical Exp.
1	10.00-10.30 am	Site tour (Environmental Manager)		Υ			
2	10.30-11.00 am	Leadership and Top Management (Top Management)	5.1, 5.2, 5.3, 6.2, 10.1, 10.3	Υ			
3	11.00-11.30 am	EMS Documentation (Environmental Manager)	4.1, 4.2, 4.3, 4.4, 5.2, 6.2, 7.5	Υ			
4	11.30-12.00 pm	Internal Audit and MRM Process (Top management/Environ mental Manager)	9.2, 9.3, 10.2	Υ			
5	12.00-13.00 pm	Process for Action Address to Risk & opportunities & Objective Achievement Planning (Environmental Manager)	6.1.1, 6.2.2	Υ			
6	13.30-14.00 pm	Resource Planning & Communication Process (Admin Manager)	7.1, 7.4	Υ			
7	14.00-14.30 pm	HR Process (HR Manager)	7.1, 7.2, 7.3	Υ			
8	14.30-15.00 pm	Environmental Aspects (Environmental Manager)	6.1.2, 6.1.4	Υ			
9	15.00-18.00 pm	Evaluation of Compliances & Legal Requirement Process (Environmental Manager)	6.1.3, 9.1	Υ			
10	18.00-17.30 pm	Operational Planning & Control Process (Environmental Manager)	8.1, 8.2	Υ			
11		Common Clauses: 5.2, 6.2, 7.2, 7.3, 7.4, 7.5, 8.2 for All above Processes					
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Audit Plan Matrix (Three Year)

BARASAT GOVERNMENT

COLLEGE

Work Order:

23MF04/2023

Client:

(A Government college under Higher Education Department, Govt. of W.B.)

Scope

Key finding from visit (office and site)

Initial Certification

inst Consultance

Second Surveillance

Re-Certification

Key points to be covered at next visit (office and site)

Office (1)

Office (2

Site (1)

Site (2)

NOTE: These notes must be explained to the client

- >> The full scope should be covered at the initial Certification and then again over the following three visits, i.e twice in first four visits (Initial Certification-First Surveillance-Second Surveillance-Re-Certification)
- >> The first surveillance must be completed within 12 months of the final day of certification decision (as per ISO 17021-1:2015)
- >> For clients who carry out work on their clients' site (e.g. construction or installation) a site visit must be done on the initial assessment, at least one of the surveillances and every recertification audit.
- >> The recertification visit should be carried out six weeks prior to the certificate expiry to allow time for the closure of any NCs prior to certificate expiry and the generation of the new certificate

		AUDIT												
Initial Certif	ication		1st Su	ırveillance			2nd Surveillance				Re Certification			
3 Days			1 Day	1 Days				1 Days 2				2 Days		
		X	0	NC	х	0	NC	x	О	NC	х	0	NC	
4.1	Understandi ng the organizatio n and its context	×	NIL	NIL	×			×			*			
4.2	Understandi ng the needs and expectation s of interested parties	×	NIL	NIL	×			x			×			
4.3	Determining the scope of the Environmen tal manageme nt system		NIL	NIL	×			×			×			
4.4	Environeme ntal manageme nt system		NIL	NIL	x			x			×			
5.1	Leadership and commitmen t	x	NIL	NIL	x			x			x			
5.2	Environmen tal Policy	×	NIL	NIL	×			x			x			
5.3	Organizatio nal roles, responsibilit ies and authorities		NIL	NIL	×			x			×			
6.1	Actions to address risks and opportunitie	×	NIL	NIL	×			x			×			
6.2	Environeme ntal objectives and	×	NIL	NIL	×			×			×			

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	planning to achieve them										
7.1	Resources	x	NIL	NIL	x		x		×		
7.2	Competenc e	×	NIL	NIL	x		x		×		
7.3	Awareness	×	NIL	NIL	×		x		x		2
7.4	Communica tion	x	NIL	NIL	х		x		×		
7.5	Documente d information	x	NIL	NIL	x		x		×		
8.1	Operational planning and control	×	NIL	NIL	x		x		×		
8.2	Emergency Preapredne ss and Responses	×	NIL	NIL	×		x		×		
9.1	Monitoring, measureme nt, analysis and evaluation	(x)	NIL	NIL	x:		x	y.	×	;	
9.2	Internal audit	x	NIL	NIL	x		x		×		
9.3	Manageme nt review	x	NIL	NIL	x		×		×		
10.1	General	x	NIL	NIL	X:		x		x		
10.2	Nonconfor mity and corrective action	×	NIL	NIL	x		x		x		
10.3	Continual improveme nt	x	NIL	NIL	×		x		×		
	Logos				x		x		×		
	Complaints	×	NIL	NIL	x		x		×		



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Shaded clause titles must be addressed at each visit	
X = Clauses to be addressed at the visit	
O = OFI raised	
M = NC Major, m = NC Minor	
A copy of this document (page 1 and 2) must be left with the client after each visit and a c	opy returned to the head office with the audit report
✓ Auditing is based on a sampling process of the available information ✓ Audit is combined, joint or integrated; ✓ The effectiveness of corrective actions taken regarding previously identified ✓ nonconformities has verified ✓ outcomes are effective and complying. ✓ The internal audit and management review process are effective and complying with the requirements. ✓ The scope of certification is appropriate. ✓ The capability of the management system to meet applicable requirements and expected ✓ The audit objectives has been fulfilled and achieved.	Sign Off:
MMS Reports Submittion : I A. Hussain prepared and completed the stage	2 report.
Client Acceptance : I Dr. Samar Chattopadhyay Position Principal Acknowle	dge And Accept The Stage 2 Report. Date 06/06/2023

14. Musson

END OF REPORT