




# AUDIT REPORT

Client ID No/ 5401	Date of Audit: 12 Nov 2019	Total Pages:
Pre-Audit <input type="checkbox"/> Stage 1 Audit <input type="checkbox"/> Stage 2 Audit <input checked="" type="checkbox"/> Surveillance Audit <input type="checkbox"/> Re-Assessment Audit <input type="checkbox"/> Transition <input type="checkbox"/> Special / Extension <input type="checkbox"/> Follow-Up <input type="checkbox"/> Unannounced <input type="checkbox"/>		
<b>Organization Name &amp; Address:</b>  <b>National Police Training Center</b>	<b>Audit Location (if different) of site visit, including dates of audit at the sites</b>  Camp Vicente Lim, Brgy., Mayapa, Calamba City	
<b>Standard(s) to be covered by certification:</b> <input checked="" type="checkbox"/> ISO 9001 <input type="checkbox"/> ISO 14001 <input type="checkbox"/> OHSAS 18001 <input type="checkbox"/> ISO 45001 <input type="checkbox"/> ISO 27001 <input type="checkbox"/> ISO 22000 <input type="checkbox"/> ISO 50001 <input type="checkbox"/> ISO 55001 <input type="checkbox"/> HACCP <input type="checkbox"/> Others, please specify:		
<b>Recommended Scope :</b> (Attach extra page if necessary)  Development and provision of education and training programs.  <b>Exclusion/s, if any (Identify the exclusion/s and justification)</b>  No exclusions		
<b>Functional Areas or Processes Audited: (please enumerate):</b> 1. Determination of internal and external issues, needs & expectations of interested parties, action plans to address risks and opportunities. 2. Policy Formulation 3. Research & Development 4. Faculty Management 5. Financial Services 6. Leadership & Commitment 7. Management Review 8. Validaton of Scope 9. Competence, awareness, organizational knowledge, communication 10. Procurement 11. Customer satisfaction & Feedback handling 12. Infrastructure & work environment 13. Control of documented information 14. Internal Audit, nonconformity & corrective action 15. Verification of previous NC : SSM-01/ ST1		
Use of Certification Mark acceptable <b>Y</b> <input checked="" type="checkbox"/> <b>N</b> <input type="checkbox"/>	If "No" Raise Action Request RP2	
Are there any changes since the last audit <b>Y</b> <input type="checkbox"/> <b>N</b> <input checked="" type="checkbox"/> If Yes, please indicate change and give brief description: Company name <input type="checkbox"/> main/site address(s) <input type="checkbox"/> scope <input type="checkbox"/> number of employees <input type="checkbox"/> OHSMS reportable serious incident or breach of regulation <input type="checkbox"/>		



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<b>1. Audit Conclusions</b>								
<b>Lead Auditor recommendation</b>	<b>QMS</b>	<b>EMS</b>	<b>OH&amp;S</b>	<b>FSMS</b>	<b>ISMS</b>	<b>EnMS</b>	<b>AMS</b>	<b>HACCP</b>
Certification recommended, subject to implementation of action plan related to AR's raised (within 30 days)	<b>X</b>							
Certification not recommended								
Certification continuation								
Certification discontinuation/suspension/withdrawal								
Certification renewal								
Certification renewal subject to implementation of action plan related to AR's raised (within 1 month of certification expiry)			*					
* I confirm that the effectiveness of the organisation's OH&SMS and that I have provided a summary of evidence of the capability of the OH&SMS to meet its compliance obligations								
<b>2.Executive Summary to Client:</b>							<b>Action Requests raised</b>	
<p>Conformity of the organization to the requirements of ISO 9001:2015 was found adequate. Quality objectives were seen established in the different process areas/ departments and were monitored, measured and generally attained.</p> <p>Corrective actions are implemented for NC's raised from internal audits or unmet targets that were recorded and corresponding corrections and corrective actions put in place.</p> <p>Process owners were knowledgeable with the procedures in their areas and knew their roles and how they contribute to the success of the Quality Management System.</p> <p><b>Verification of Previous NC's :</b></p> <p>1. SSM-01/ ST1 : NC is closed</p>							<b># Major</b>	<b># Minor</b>
							0	4
							Initial date AR response due: 23 Dec 2019	
This Report consists of this document (RP1) <input checked="" type="checkbox"/> , attachments (RP1-1) <input checked="" type="checkbox"/> and action requests (RP2) <input checked="" type="checkbox"/> as indicated								
<b>OH&amp;S Management System audits only.</b>								
In case of OHSMS, have all activities, products and services within the organisation's control or influence that can impact the organisation's OHSMS performance been included in the management system? <input type="checkbox"/> yes <input type="checkbox"/> no								
Is a Special Audit recommended following an OHSMS reportable serious incident or breach of regulation? <input type="checkbox"/> yes <input type="checkbox"/> no								
State justification:								
RP1-CIP								

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<p>Has there been a closure of facilities/work areas since the last audit? <input type="checkbox"/> yes <input type="checkbox"/> no If Yes, confirm that new risks have been identified and handled in compliance with requirement. Provide evidence.</p> <p>Are there any areas of concern (i.e. for OHSMS a serious accident or incident or breach of OHS regulation necessitating the involvement of the competent authority) that could be classified as a nonconformity during stage 2 or would affect the transfer of certification? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, please specify:</p> <p>Are there any relevant regulatory requirements that have been identified as a non-conformance and needed to be communicated to the organisation? <input type="checkbox"/> yes <input type="checkbox"/> no Please provide details.</p>		
<p>Lead Auditor</p> <p>Name/ Signed :  RENATO MADRID, JR.</p> <p>Date : 18 Nov 2019</p>	<p>Company Representative</p> <p>Name/ Signed</p> <p>Date</p>	
Audit Team Members: Lead Auditor	Renato G. Madrid Jr.	
Auditor 1	Sofia S. Mangahas	
Auditor 2		
Auditor 3		
Auditor 4/Technical Advisor		
<p><b>3. Audit Summary</b></p> <p>What to report on within this section:</p> <p>Stage 1</p> <p>(a) Comment on compliance of management system documentation (b) Level of preparedness (c) Identification of sites whether they are to appear on certificates or just support the main site and if they are considered key sites (attach list if possible)</p> <p>All Audits.</p> <p>(a) Confirm Audit Plan was covered or provide details if not. (b) Comment on the organization's current activities related to the scope (existing business, new business etc.). (c) Comment on level of compliance with the relevant standard(s), (d) Comment on <u>effectiveness of links</u> between standards, organization's policy, objectives and targets, legal requirements, responsibilities, personnel competence, operations, procedures, performance data and internal findings and conclusions as appropriate (e) Key positive comments</p>		