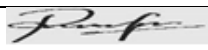|	**SIRIM QAS INTERNATIONAL SDN. BHD.** **MANAGEMENT SYSTEM CERTIFICATION DEPARTMENT** **Block 4, SIRIM Complex, No. 1, Persiaran Dato' Menteri** **Section 2, 40700 Shah Alam, Selangor Darul Ehsan**	**File No. :** 20190100614
	QUALITY MANAGEMENT SYSTEM **SURVEILLANCE AUDIT REPORT**	

CLIENT : UNIVERSITI PUTRA MALAYSIA

ADDRESS OF MAIN SITE AUDITED
(In the case of multisite certification, additional sites are listed in the attachment) :

UNIVERSITI PUTRA MALAYSIA
43400 SERDANG
SELANGOR DARUL EHSAN

CERTIFICATION NO : QMS 00794	**STANDARD** : ISO 9001:2015
AUDIT DATE : 30/11 – 10/12 2020 / 35 auditor day(s)	**LAST AUDIT DATE :** 17 - 27 September 2019

SCOPE OF CERTIFICATION :

PERKHIDMATAN PENGAJIAN PENDIDIKAN DI PERINGKAT TERTIARY, PENGURUSAN DAN PERLAKSANAAN PENYELIDIKAN, PERHUBUNGAN INDUSTRI DAN MASYARAKAT, PENGURUSAN PEMBANGUNAN PELAJAR DAN ALUMNI DAN PERKHIDMATAN KORPORAT.

AUDIT TEAM :		
	PARIMALA DEVI GANESAN	Ketua pasukan audit (9)
	SITI ROSHAIZA BINTI ALI	Ahli pasukan audit (7)
	ELLY NADIA BT CHE AFZAR	Ahli pasukan audit (5)
	MOHD NASIM BIN ZAKARIA	Ahli pasukan audit (4)
	MANI MAARAN KRISHNAN	Ahli pasukan audit (4)
	RAJALEKSHMI RAMA CHANDRAM	Ahli pasukan audit (4)
	SURI YATI BT AMRAN	Ahli pasukan audit (2)

NO. OF EMPLOYEES (Applicable to the scope of certification) : 6038

Report by Audit Team Leader	**Acknowledgement by Client's Representative**
Name : PARIMALA DEVI GANESAN	Name : Profesor Dr Amin Ismail
Signature :	Signature :
Date : 10 December 2020	Date : 10 December 2020

The Audit Plan and the following attachments form part of this report:	**Report reviewed by :**
Nonconformity Report(s) ■	
Opportunities for Improvement ☐	**(Senior Auditor/ Section Head)**
List of additional site(s) ☐	
Tick (√) where applicable	**Date**

SURVEILLANCE AUDIT REPORT

1. ANY DEVIATION FROM THE AUDIT PLAN AND THEIR REASONS (IF APPLICABLE)

Tidak berkaitan.

2. SIGNIFICANT CHANGES TO ORGANIZATION'S QUALITY MANAGEMENT SYSTEM SINCE THE LAST AUDIT (IF APPLICABLE)

Naib Canselor Prof Dr. Mohd Roslan Sulaiman, lantikan baharu pada 1/9/2020

3. SUMMARY OF EFFECTIVENESS OF ACTIONS TAKEN ON NONCONFORMITIES IDENTIFIED DURING THE PREVIOUS AUDIT (details of NCRs and their status are to be listed in Appendix 1):

Tindakan pembetulan telah dilaksanakan.

4. USE OF CERTIFICATION / ACCREDITATION MARKS & CERTIFICATION DOCUMENT (CERTIFICATE)

☐ Not in use   ☐ Used; unacceptable

■ Used; acceptable   Action required:

5. SUMMARY ON FINDINGS :

5.1 Changes in the external and internal issues relevant to the quality management system

UPM telah menyemak secara keseluruhan isu dalaman dan isu luaran, yang mana isu-isu yang mengakibatkan risiko rendah untuk 2 tahun berturut-turut, serta isu-isu yang sudah tidak lagi relevan, akan digugurkan pada tahun berikutnya. Penambahan atau pengurangan isu dalaman serta isu luaran yang telah dikaji semula dan dikenalpasti.

5.2 Appropriateness of risks and opportunities identified and actions taken to address them

Untuk risiko-risiko yang dikenalpasti berdasarkan isu dalaman serta isu luaran, ianya adalah relevan, dan tindakan yang diambil untuk menangani risiko tersebut adalah bersesuaian dengan kesan terhadap risiko tersebut. UPM telah melakukan analisa untuk menilai keberkesanan tindakan yang diambil untuk mengatasi risiko tersebut.

UPM mengenalpasti Peluang melalui KPI UPM. KPI UPM dipantau secara berkala oleh pengurusan universiti.

5.3 Summary of performance against objectives and actions taken if applicable

UPM menganalisa pencapaian objektif melalui laporan KPI, Piagam Pelanggan dan Pelan Tindakan Peringkat Fungsian Dan Aras. Untuk mana-mana prestasi yang tidak mencapai sasaran, PTJ yang terlibat akan mengambil tindakan yang sewajarnya.

5.4 Internal audit

Sejak tahun 2019, UPM telah melaksanakan audit dalam secara berpusat di PTJ masing-masing. Bagi tahun 2020, UPM telah merancang serta melaksanakan decentralize audit dalaman pada bulan Mac hingga Ogos 2020. Bengkel Pemantapan audit telah dilaksanakan pada Februari 2020. Penemuan audit bagi tahun 2020 adalah 167 NCR dan 216 OFI. Secara keseluruhan perlaksanaan audit boleh ditambahbaik. *Rujuk Laporan peluang penambahbaikan.*

5.5 Management review

Mesyuarat Kajian Semula pengurusan telah diadakan pada 17/11/2020 dan dihadiri oleh Naib Cancelor Profesor Dr. Mohd Roslan Sulaiman serta kesemua pihak pengurusan. Pelaksanaan telah disokong oleh minit mesyuarat dan pembentangan data yang berkaitan. Minit MKSP menunjukkan kesemua input semakan telah dibincangkan dan output/keputusan semakan juga telah direkodkan dengan jelas.

UPM juga menjalankan mesyuarat-mesyuarat lain seperti mesyuarat akademik, mesyuarat jabatan dan mesyuarat pengurusan untuk memantau prestasi sistem pengurusan kualiti.

5.6 Handling of customer complaints

UPM merekokan sebanyak 259 aduan untuk tahun 2019 menerusi sistem U-RESPON. Aduan telah diuruskan mengikut prosedur yang ditetapkan dan 132 aduan telah ditutup dalam tempoh yang ditetapkan manakala 20 dalam tindakan.

SURVEILLANCE AUDIT REPORT

5.7 **Continual** improvement

Antara penambahbaikan yang dikenalpasti adalah seperti Pembangunan Sistem PutraENROLL untuk memudahkan proses pendaftaran, Sistem PutraAQAS bagi menambahbaik proses akreditasi dan sebagainya

5.8 **Useful comparisons with previous audit results**

Komitmen seluruh warga kerja UPM adalah tinggi dan positif untuk melaksanakan proses penambahbaikan disemua peringkat. Tiada laporan ketakakuran dkeluarkan.

6. **NONCONFORMITY REPORT(S)**

Total no. of minor NCR(s) : NIL List : NIL

Total no. of major NCR(s) : NIL List : NIL

List of minor NCRs which collectively constitute major NCR(s) : NIL

7. **ANY UNRESOLVED ISSUES, IF APPLICABLE**

Tiada.

8. **ANY SIGNIFICANT ISSUES THAT MAY IMPACT THE AUDIT PROGRAMME**

Tiada.

9. **CONCLUSION ON THE CONFORMITY AND EFFECTIVENESS OF THE SYSTEM**

Hasil semakan audit mendapati pelaksanaan sistem pengurusan kualiti UPM mematuhi kepertuan standard ISO 9001:.2015. Pencapeian objektif juga telah diiaporkan kepada pihak pengurusan melalui Mesyuarat Pengurusan dan juga Mesyuarat Kajian Semula Pengurusan. Pemantauan prestasi organisasi melalui audit dalaman, mesyuarat semakan pengurusan dan maklumbaias pelanggan telah dilaksanakan dengan berkesan. Walaubagaimanapun sistem pengurusan kualiti UPM masih boleh ditambahbaik seperti yang dilaporkan didalam Laporan Peluang Penambahbaikan.

10. **APPROPRIATENESS OF THE SCOPE OF CERTIFICATION**

■ Yes

☐ No (please comment) :

11. **HAVE THE AUDIT OBJECTIVES BEEN FULFILLED?**

■ Yes

☐ No (please comment) :

12. RECOMMENDATION

☑ No NCR recorded. Recommended to continue certification *~~with~~ / without change.

☐ Minor NCR(s) recorded. Recommended to continue certification *~~with~~ / without change conditional upon satisfactory verification of corrective actions taken.

☐ Major NCR(s) recorded. Recommendation to continue certification *with / without change will be made after :

    ☐ On-site audit of the following area(s) including verification of corrective action :

    ☐ Off-site verification of corrective action(s). Records of implementation of proposed corrective action to be submitted for verification.

* Nature of change :
  (if applicable)

☐ Suspension of certification, a reaudit of the system shall be carried out before a recommendation is made to lift the suspension.

☐ Withdrawal of certification.
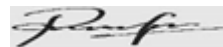
Note :

    a) *Corrective Action Plans for all nonconformities (minor/ major) raised shall be submitted to the Audit Team Leader within one month and evidence of implementation within 3 months of the date of this report. Failure to comply shall result in either suspension or withdrawal of the certification.*

    b) *If there is any unresolved issue at the end of the audit, it shall be brought to the attention of the management of SIRIM QAS Intl for resolution. The client will be notified in writing of the decision within two weeks of the date of this report.*

    c) *In case the evidence of correction/ corrective actions submitted is not adequate, SIRIM QAS Intl reserves the right to conduct an on-site audit to verify the effectiveness of correction/ corrective actions taken.*

    d) *Auditing is based on a sampling process of the available information.*

FOLLOW UP ON NCR(s)

It is confirmed that all corrective actions taken have been satisfactorily verified. Recommended to continue certification.

Audit Team Leader :	PARIMALA DEVI GANESAN	*Panfra*	10/12/2020
	(Name)	(Signature)	(Date)

SURVEILLANCE AUDIT REPORT

SUMMARY BY FUNCTION/ PROCESS/ PROJECT SITE

File No. : 20190100614

ISO 9001:2015		Requirement audited	Pusat Jaminan Kualiti	Fakulti perhutanan dan Alam Sekitar	Fakulti Bahasa Moden dan Komunikasi	Institut Perhutanan Tropika dan Produk Hutan	Fakulti Kejuruteraan	Institut Penyelidikan Matematik	Sekolah Perniagaan dan Ekonomi	Fakulti Pertanian	Fakulti Sains	Major	Minor
4. Context of the organization													
4.1	Understanding the organization and its context	/	/	/	/	/	/	/	/	/	/		
4.2	Understanding the needs and expectations of interested parties	/	/	/	/	/	/	/	/	/	/		
4.3	Determining the scope of the quality management system	/	/	/	/	/	/	/	/	/	/		
4.4	Quality management system and its processes	/	/	/	/	/	/	/	/	/	/		
5. Leadership													
5.1	Leadership and commitment	/	/	/	/	/	/	/	/	/	/		
5.1.1	General	/	/	/	/	/	/	/	/	/	/		
5.1.2	Customer focus	/	/	/	/	/	/	/	/	/	/		
5.2	Policy	/	/	/	/	/	/	/	/	/	/		
5.2.1	Establishing the quality policy	/	/	/	/	/	/	/	/	/	/		
5.2.2	Communicating the quality policy	/	/	/	/	/	/	/	/	/	/		
5.3	Organizational roles, responsibilities and authorities	/	/	/	/	/	/	/	/	/	/		
6. Planning													
6.1	Actions to address risks and opportunities	/	/	/	/	/	/	/	/	/	/		
6.2	Quality objectives and planning to achieve them	/	/	/	/	/	/	/	/	/	/		
6.3	Planning of changes	/	/	/	/	/	/	/	/	/	/		
7. Support													
7.1	Resources	/	/	/	/	/	/	/	/	/	/		
7.1.1	General	/	/	/	/	/	/	/	/	/	/		
7.1.2	People	/	/	/	/	/	/	/	/	/	/		
7.1.3	Infrastructure	/		/			/	/	/	/	/		
7.1.4	Environment for the operation of processes	/											
7.1.5	Monitoring and measuring resources	/		/			/	/	/	/	/		
7.1.5.1	General	/		/			/	/	/	/	/		
7.1.5.2	Measurement traceability	/		/		/	/			/	/		
7.1.6	Organizational knowledge	/	/	/	/	/	/	/	/	/	/		
7.2	Competence	/	/	/	/	/	/	/	/	/	/		
	Major / **Minor**												

Note :
a) Indicate in the "Requirement audited" column with a (√) the requirements that were audited and (-) for requirements that were not audited.
b) In the case where requirements were audited and nonconformities detected, replace the (√) with the number of nonconformities (no. of major/ no. of minor)
c) Indicate with (NA) if the requirement is not applicable.

SURVEILLANCE AUDIT REPORT

SUMMARY BY FUNCTION/ PROCESS/ PROJECT SITE

ISO 9001:2015		Requirement audited	FUNCTION/ PROCESS/ PROJECT SITE									NCR	
			Pusat Jaminan Kualiti	Fakulti perhutanan dan Alam Sekitar	Fakulti Bahasa Moden dan Komunikasi	Institut Perhutanan Tropika dan Produk Hutan	Fakulti Kejuruteraan	Institut Penyelidikan Matematik	Sekolah Perniagaan dan Ekonomi	Fakulti Pertanian	Fakulti Sains	Major	Minor
7.3	Awareness	/	/	/	/	/	/	/	/	/	/		
7.4	Communication	/	/	/	/	/	/	/	/	/	/		
7.5	Documented information	/	/	/	/	/	/	/	/	/	/		
7.5.1	General	/	/	/	/	/	/	/	/	/	/		
7.5.2	Creating and updating	/	/	/	/	/	/	/	/	/	/		
7.5.3	Control of documented information	/	/	/	/	/	/	/	/	/	/		
8. Operation													
8.1	Operational planning and control	/	/	/	/	/	/	/	/	/	/		
8.2	Requirements for products and services	/	/	/	/	/	/	/	/	/	/		
8.2.1	Customer communication	/	/	/	/	/	/	/	/	/	/		
8.2.2	Determining the requirements for products and services	/	/	/	/	/	/	/	/	/	/		
8.2.3	Review of the requirements for products and services	/	/	/	/	/	/	/	/	/	/		
8.2.4	Changes to requirements for products and services	/	/	/	/	/	/	/	/	/	/		
8.3	Design and development of products and services	/	/	/	/	/	/	/	/	/	/		
8.3.1	General	/	/	/	/	/	/	/	/	/	/		
8.3.2	Design and development planning	/	/	/	/	/	/	/	/	/	/		
8.3.3	Design and development inputs	/	/	/	/	/	/	/	/	/	/		
8.3.4	Design and development controls	/	/	/	/	/	/	/	/	/	/		
8.3.5	Design and development outputs	/	/	/	/	/	/	/	/	/	/		
8.3.6	Design and development changes	/	/	/	/	/	/	/	/	/	/		
8.4	Control of externally provided processes, products and services	/	/	/	/	/	/	/	/	/	/		
8.4.1	General	/	/	/	/	/	/	/	/	/	/		
8.4.2	Type and extent of control	/	/	/	/	/	/	/	/	/	/		
8.4.3	Information for external providers	/	/	/	/	/	/	/	/	/	/		
8.5	Production and service provision	/	/	/	/	/	/	/	/	/	/		
8.5.1	Control of production and service provision	/	/	/	/	/	/	/	/	/	/		
8.5.2	Identification and traceability	/	/	/	/	/	/	/	/	/	/		
8.5.3	Property belonging to customers or external providers	/	/	/	/	/	/	/	/	/	/		
8.5.4	Preservation	/	/	/	/	/	/	/	/	/	/		
Major / **Minor**													

Note :
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SUMMARY BY FUNCTION/ PROCESS/ PROJECT SITE

ISO 9001:2015		Requirement audited	Pusat Jaminan Kualiti	Fakulti perhutanan dan Alam Sekitar	Fakulti Bahasa Moden dan Komunikasi	Institut Perhutanan Tropika dan Produk Hutan	Fakulti Kejuruteraan	Institut Penyelidikan Matematik	Sekolah Perniagaan dan Ekonomi	Fakulti Pertanian	Fakulti Sains	NCR Major	Minor
8.5.5	Post-delivery activities	/	/	/	/	/	/	/	/	/	/		
8.5.6	Control of changes	/	/	/	/	/	/	/	/	/	/		
8.6	Release of products and services	/	/	/	/	/	/	/	/	/	/		
8.7	Control of nonconforming outputs	/	/	/	/	/	/	/	/	/	/		
9. Performance evaluation													
9.1	Monitoring, measurement, analysis and evaluation	/	/	/	/	/	/	/	/	/	/		
9.1.1	General	/	/	/	/	/	/	/	/	/	/		
9.1.2	Customer satisfaction	/	/	/	/	/	/	/	/	/	/		
9.1.3	Analysis and evaluation	/	/	/	/	/	/	/	/	/	/		
9.2	Internal audit	/	/	/	/	/	/	/	/	/	/		
9.3	Management review	/	/	/	/	/	/	/	/	/	/		
9.3.1	General	/	/	/	/	/	/	/	/	/	/		
9.3.2	Management review inputs	/	/	/	/	/	/	/	/	/	/		
9.3.3	Management review outputs	/	/	/	/	/	/	/	/	/	/		
10. Improvement													
10.1	General	/	/	/	/	/	/	/	/	/	/		
10.2	Nonconformity and corrective action	/	/	/	/	/	/	/	/	/	/		
10.3	Continual improvement	/	/	/	/	/	/	/	/	/	/		
Other Certification Requirements													
1.	Use of marks/ certificate	/											
	Major / **Minor**												

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SURVEILLANCE AUDIT REPORT

SUMMARY BY FUNCTION/ PROCESS/ PROJECT SITE

File No. : 20190100614

ISO 9001:2015		Requirement audited	FUNCTION/ PROCESS/ PROJECT SITE									NCR	
			Akademi Sukan	Pusat Pembangun an Akademik	Pusat Antarabangsa	Taman Pertanian Universiti (Kampus Bintulu)	Pusat Pembangunan Maklumat dan Komunikasi (IDEC) Bahagian Kemasukan	Bahagian Kemasukan dan Bahagian Urus Tadbir Akademik	Pusat Pemajuan Kompetensi Bahasa	Pejabat Strategi Korporat dan Komunikasi	Pejabat Pengurusan Keselamatan dan Kesihatan Pekerjaan	Major	Minor
4. Context of the organization													
4.1	Understanding the organization and its context	/	/	/	/	/	/	/	/	/	/		
4.2	Understanding the needs and expectations of interested parties	/	/	/	/	/	/	/	/	/	/		
4.3	Determining the scope of the quality management system	/	/	/	/	/	/	/	/	/	/		
4.4	Quality management system and its processes	/	/	/	/	/	/	/	/	/	/		
5. Leadership													
5.1	Leadership and commitment	/	/	/	/	/	/	/	/	/	/		
5.1.1	General	/	/	/	/	/	/	/	/	/	/		
5.1.2	Customer focus	/	/	/	/	/	/	/	/	/	/		
5.2	Policy	/	/	/	/	/	/	/	/	/	/		
5.2.1	Establishing the quality policy	/	/	/	/	/	/	/	/	/	/		
5.2.2	Communicating the quality policy	/	/	/	/	/	/	/	/	/	/		
5.3	Organizational roles, responsibilities and authorities	/	/	/	/	/	/	/	/	/	/		
6. Planning													
6.1	Actions to address risks and opportunities	/	/	/	/	/	/	/	/	/	/		
6.2	Quality objectives and planning to achieve them	/	/	/	/	/	/	/	/	/	/		
6.3	Planning of changes	/	/	/	/	/	/	/	/	/	/		
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7.1.1	General	/	/	/	/	/	/	/	/	/	/		
7.1.2	People	/	/	/	/	/	/	/	/	/	/		
7.1.3	Infrastructure	/											
7.1.4	Environment for the operation of processes	/											
7.1.5	Monitoring and measuring resources	/											
7.1.5.1	General	/											
7.1.5.2	Measurement traceability	/											
7.1.6	Organizational knowledge	/	/	/	/	/	/	/	/	/	/		
7.2	Competence	/	/	/	/	/	/	/	/	/	/		
Major / **Minor**													

Note :
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SURVEILLANCE AUDIT REPORT

SUMMARY BY FUNCTION/ PROCESS/ PROJECT SITE

ISO 9001:2015		Requirement audited	Akademi Sukan	Pusat Pembangunan Akademik	Pusat Antarabangsa	Taman Pertanian Universiti (Kampus Bintulu)/ Pusat Pembangunan	Maklumat dan Komunikasi (IDEC) Bahagian Kemasukan	Bahagian Kemasukan dan Bahagian Urus Tadbir Akademik	Pusat Pemajuan Kompetensi Bahasa	Pejabat Strategi Korporat dan Komunikasi	Pejabat Pengurusan Keselamatan dan Kesihatan Pekerjaan	NCR Major	Minor
7.3	Awareness	/	/	/	/	/	/	/	/	/	/		
7.4	Communication	/	/	/	/	/	/	/	/	/	/		
7.5	Documented information	/	/	/	/	/	/	/	/	/	/		
7.5.1	General	/	/	/	/	/	/	/	/	/	/		
7.5.2	Creating and updating	/	/	/	/	/	/	/	/	/	/		
7.5.3	Control of documented information	/	/	/	/	/	/	/	/	/	/		
8. Operation													
8.1	Operational planning and control	/	/	/	/	/	/	/	/	/	/		
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8.2.1	Customer communication	/	/	/	/	/	/	/	/	/	/		
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8.2.3	Review of the requirements for products and services	/	/	/	/	/	/	/	/	/	/		
8.2.4	Changes to requirements for products and services	/	/	/	/	/	/	/	/	/	/		
8.3	Design and development of products and services	/			/	/	/		/	/			
8.3.1	General	/			/	/	/		/	/			
8.3.2	Design and development planning	/			/	/	/		/	/			
8.3.3	Design and development inputs	/			/	/	/		/	/			
8.3.4	Design and development controls	/			/	/	/		/	/			
8.3.5	Design and development outputs	/			/	/	/		/	/			
8.3.6	Design and development changes	/			/	/	/		/	/			
8.4	Control of externally provided processes, products and services	/	/	/	/	/	/	/	/	/	/		
8.4.1	General	/	/	/	/	/	/	/	/	/	/		
8.4.2	Type and extent of control	/	/	/	/	/	/	/	/	/	/		
8.4.3	Information for external providers	/	/	/	/	/	/	/	/	/	/		
8.5	Production and service provision	/	/	/	/	/	/	/	/	/	/		
8.5.1	Control of production and service provision	/	/	/	/	/	/	/	/	/	/		
8.5.2	Identification and traceability	/	/	/	/	/	/	/	/	/	/		
8.5.3	Property belonging to customers or external providers	/	/	/	/	/	/	/	/	/	/		
8.5.4	Preservation	/	/	/	/	/	/	/	/	/	/		
Major **Minor**													

Note :
d) Indicate in the "Requirement audited" column with a (√) the requirements that were audited and (-) for requirements that were not audited.
e) In the case where requirements were audited and nonconformities detected, replace the (√) with the number of nonconformities (no. of major/ no. of minor)
f) Indicate with (NA) if the requirement is not applicable.

	SURVEILLANCE AUDIT REPORT

SUMMARY BY FUNCTION/ PROCESS/ PROJECT SITE

ISO 9001:2015		Requirement audited	FUNCTION/ PROCESS/ PROJECT SITE									NCR	
			Akademi Sukan	Pusat Pembangun an Akademik	Pusat Antarabangsa	Taman Pertanian Universiti (Kampus Bintulu)	Pusat Pembangunan Maklumat dan Komunikasi (IDEC) Bahagian Kemasukan	Bahagian Kemasukan dan Bahagian Urus Tadbir Akademik	Pusat Pemajuan Kompetensi Bahasa	Pejabat Strategi Korporat dan Komunikasi	Pejabat Pengurusan Keselamatan dan Kesihatan	Major	Minor
8.5.5	Post-delivery activities	/	/	/	/	/	/	/	/	/	/		
8.5.6	Control of changes	/	/	/	/	/	/	/	/	/	/		
8.6	Release of products and services	/	/	/	/	/	/	/	/	/	/		
8.7	Control of nonconforming outputs	/	/	/	/	/	/	/	/	/	/		
9. Performance evaluation													
9.1	Monitoring, measurement, analysis and evaluation	/	/	/	/	/	/	/	/	/	/		
9.1.1	General	/	/	/	/	/	/	/	/	/	/		
9.1.2	Customer satisfaction	/	/	/	/	/	/	/	/	/	/		
9.1.3	Analysis and evaluation	/	/	/	/	/	/	/	/	/	/		
9.2	Internal audit	/	/	/	/	/	/	/	/	/	/		
9.3	Management review	/	/	/	/	/	/	/	/	/	/		
9.3.1	General	/	/	/	/	/	/	/	/	/	/		
9.3.2	Management review inputs	/	/	/	/	/	/	/	/	/	/		
9.3.3	Management review outputs	/	/	/	/	/	/	/	/	/	/		
10. Improvement													
10.1	General	/	/	/	/	/	/	/	/	/	/		
10.2	Nonconformity and corrective action	/	/	/	/	/	/	/	/	/	/		
10.3	Continual improvement	/	/	/	/	/	/	/	/	/	/		
Other Certification Requirements													
1.	Use of marks/ certificate	/											
	Major / **Minor**												

Note :
d) Indicate in the "Requirement audited" column with a (√) the requirements that were audited and (-) for requirements that were not audited.
e) In the case where requirements were audited and nonconformities detected, replace the (√) with the number of nonconformities (No of major/ no. of minor)
f) Indicate with (NA) if the requirement is not applicable.

SURVEILLANCE AUDIT REPORT

SUMMARY BY FUNCTION/ PROCESS/ PROJECT SITE

File No. : 20190100614

ISO 9001:2015		Requirement audited	FUNCTION/ PROCESS/ PROJECT SITE										NCR	
			Kolej 10	Kolej 13	Bahagian Pembangunan (Kampus Bintulu)	Pejabat Bursar	Pejabat Pendaftar						Major	Minor
4. Context of the organization														
4.1	Understanding the organization and its context	/	/	/	/	/	/							
4.2	Understanding the needs and expectations of interested parties	/	/	/	/	/	/							
4.3	Determining the scope of the quality management system	/	/	/	/	/	/							
4.4	Quality management system and its processes	/	/	/	/	/	/							
5. Leadership														
5.1	Leadership and commitment	/	/	/	/	/	/							
5.1.1	General	/	/	/	/	/	/							
5.1.2	Customer focus	/	/	/	/	/	/							
5.2	Policy	/	/	/	/	/	/							
5.2.1	Establishing the quality policy	/	/	/	/	/	/							
5.2.2	Communicating the quality policy	/	/	/	/	/	/							
5.3	Organizational roles, responsibilities and authorities	/	/	/	/	/	/							
6. Planning														
6.1	Actions to address risks and opportunities	/	/	/	/	/	/							
6.2	Quality objectives and planning to achieve them	/	/	/	/	/	/							
6.3	Planning of changes	/	/	/	/	/	/							
7. Support														
7.1	Resources	/	/	/	/	/	/							
7.1.1	General	/	/	/	/	/	/							
7.1.2	People	/	/	/	/	/	/							
7.1.3	Infrastructure	/	/	/	/									
7.1.4	Environment for the operation of processes	/	/	/	/									
7.1.5	Monitoring and measuring resources	/												
7.1.5.1	General	/												
7.1.5.2	Measurement traceability	/												
7.1.6	Organizational knowledge	/	/	/	/	/	/							
7.2	Competence	/	/	/	/	/	/							
Major / **Minor**														

Note :

g) Indicate in the "Requirement audited" column with a (√) the requirements that were audited and (-) for requirements that were not audited.

h) In the case where requirements were audited and nonconformities detected, replace the (√) with the number of nonconformities (no. of major/ no. of minor)

i) Indicate with (NA) if the requirement is not applicable.

SUMMARY BY FUNCTION/ PROCESS/ PROJECT SITE

ISO 9001:2015		Requirement audited	FUNCTION/ PROCESS/ PROJECT SITE									NCR	
			Kolej 10	Kolej 13	Bahagian Pembangunan (Kampus Bintulu)	Pejabat Bursar	Pejabat Pendaftar					Major	Minor
7.3	Awareness	/	/	/	/	/	/						
7.4	Communication	/	/	/	/	/	/						
7.5	Documented information	/	/	/	/	/	/						
7.5.1	General	/	/	/	/	/	/						
7.5.2	Creating and updating	/	/	/	/	/	/						
7.5.3	Control of documented information	/	/	/	/	/	/						
8. Operation													
8.1	Operational planning and control	/	/	/	/	/	/						
8.2	Requirements for products and services	/	/	/	/	/	/						
8.2.1	Customer communication	/	/	/	/	/	/						
8.2.2	Determining the requirements for products and services	/	/	/	/	/	/						
8.2.3	Review of the requirements for products and services	/	/	/	/	/	/						
8.2.4	Changes to requirements for products and services	/	/	/	/	/	/						
8.3	Design and development of products and services												
8.3.1	General												
8.3.2	Design and development planning												
8.3.3	Design and development inputs												
8.3.4	Design and development controls												
8.3.5	Design and development outputs												
8.3.6	Design and development changes												
8.4	Control of externally provided processes, products and services	/	/	/	/	/	/						
8.4.1	General	/	/	/	/	/	/						
8.4.2	Type and extent of control	/	/	/	/	/	/						
8.4.3	Information for external providers	/	/	/	/	/	/						
8.5	Production and service provision	/	/	/	/	/	/						
8.5.1	Control of production and service provision	/	/	/	/	/	/						
8.5.2	Identification and traceability	/	/	/	/	/	/						
8.5.3	Property belonging to customers or external providers	/	/	/	/	/	/						
8.5.4	Preservation	/	/	/	/	/	/						
Major / **Minor**													

Note :
g) Indicate in the "Requirement audited" column with a (√) the requirements that were audited and (-) for requirements that were not audited.
h) In the case where requirements were audited and nonconformities detected, replace the (√) with the number of nonconformities (no. of major/ no. of minor)
i) Indicate with (NA) if the requirement is not applicable.

SUMMARY BY FUNCTION/ PROCESS/ PROJECT SITE

ISO 9001:2015		Requirement audited	FUNCTION/ PROCESS/ PROJECT SITE										NCR	
			Kolej 10	Kolej 13	Bahagian Pembangunan (Kampus Bintulu)	Pejabat Bursar	Pejabat Pendaftar						Major	Minor
8.5.5	Post-delivery activities	/	/	/	/	/	/							
8.5.6	Control of changes	/	/	/	/	/	/							
8.6	Release of products and services	/	/	/	/	/	/							
8.7	Control of nonconforming outputs	/	/	/	/	/	/							
9. Performance evaluation														
9.1	Monitoring, measurement, analysis and evaluation	/	/	/	/	/	/							
9.1.1	General	/	/	/	/	/	/							
9.1.2	Customer satisfaction	/	/	/	/	/	/							
9.1.3	Analysis and evaluation	/	/	/	/	/	/							
9.2	Internal audit	/	/	/	/	/	/							
9.3	Management review	/	/	/	/	/	/							
9.3.1	General	/	/	/	/	/	/							
9.3.2	Management review inputs	/	/	/	/	/	/							
9.3.3	Management review outputs	/	/	/	/	/	/							
10. Improvement														
10.1	General	/	/	/	/	/	/							
10.2	Nonconformity and corrective action	/	/	/	/	/	/							
10.3	Continual improvement	/	/	/	/	/	/							
Other Certification Requirements														
1.	Use of marks/ certificate	/												
Major **Minor**													0	0

Note :
g) Indicate in the "Requirement audited" column with a (√) the requirements that were audited and (-) for requirements that were not audited.
h) In the case where requirements were audited and nonconformities detected, replace the (√) with the number of nonconformities (No of major/ no. of minor)
i) Indicate with (NA) if the requirement is not applicable.

APPENDIX 1 : VERIFICATION OF PREVIOUSLY RAISED NONCONFORMITY REPORTS:

File No. : 20190100614

No.	NCR Reference No.	Evidence sighted for the implementation of the corrective action	Effectiveness of corrective action (Y/N)	Remarks
1	MMK01	Minit mesyuarat fakulti dan pengurusan	Y	-
2	DMM01	Minit mesyuarat fakulti dan pengurusan	Y	

Note:
If the corrective action has not been effectively implemented, a new NCR shall be reissued and indicate in the "Remarks" column.

Auditor Name: PARIMALA DEVI GANESAN   Date: 10 December 2020

OPPORTUNITIES FOR IMPROVEMENT		
Clause	**Details**	**Comments on action taken**
7.5.3	**Kawalan maklumat didokumentasikan** Sukatan Pelajaran Modul (silibus) di peringkat PTJ dikenal pasti dengan tajuk / kod sahaja. Status sama ada dokumen semasa atau sebaliknya tidak dapat ditentukan kerana tidak ada pindaan, nombor semakan atau tarikh kuat kuasa. Ini boleh menyukarkan rujukan kepada dokumen terkini terutamanya setelah dibuat pindaan. Contoh: Fakulti perhutanan & Alam Sekitar - FHM 3102, FHM 4303 Fakulti Bahasa moden & Komunikasi - KOC 3431, KOC 3433, KOM 6117	
8.5.1	**Kawalan penyediaan pengeluaran dan perkhidmatan** Rancangan pengajaran yang dilihat dalam system e-SMP boleh dikemaskini agar berpatutan dengan course outline. Example: BBF 3304 *(Fakulti Bahasa moden & Komunikasi)*	
8.5.1	**Kawalan penyediaan pengeluaran dan perkhidmatan** Perancangan dan perlaksanaan projek jaringan industri di bawah Akademi Sukan adalah berdasarkan kepada keperluan prosedur, namun pemantauan yang dilaksnakan secara berkala boleh didokumentasikan dengan jelas. *(Akademi Sukan)*	
9.1.3	**Analisis dan penilaian** Output kajian exit survey pelajar dianalisa dan digunakan untuk proses penambahbaikan diperingkat PTJ melalui *Maklumbalas Laporan Kajian Exit Survey Pelajar*. Walaubagaimanapun laporan maklumbalas ini boleh ditambahbaik agar tindakan susulan yang diambil boleh disahkan di peringkat Pusat Pembangunan Akademik.	
6.1	**Tindakan untuk menangani risiko dan peluang** Strategi tindakan yang ditentukan oleh PTJ untuk beberapa risiko dalam system *e-OPRISK* boleh dikaji semula agar ia adalah bukan tindakan yang sedia ada. Contoh: e-OPRISK *(Pusat Pembanguna Akademik)*	

9.2	**Audit Dalaman** Hasil siasatan dan pengenalpastian punca ketidakpatuhan tidak secara menyeluruh dalam tindakan pembetulan yang diambil. Mekanisma untuk pengendalian laporan ketakakuran boleh diperkemaskan lagi agar tindakan pembetulan yang diambil berdasarkan kepada klausa 10.2.	

Auditor :   Parimala Devi Ganesan

Date   :   10-Dec-2020

	OPPORTUNITIES FOR IMPROVEMENT	
Clause	**Details**	**Comments on action taken**
8.5.1	a) Proses pemantauan penghantaran lapuran kemajuan projek, kemaskini status projek (dalam sistem) dan pengemaskinian jadual pemantauan boleh dimantapkan lagi. (Fakulti Sains dan Engineering) b) Proses perlantikan penyelia industri untuk program Dr. Engineering dalam tempoh masa yang telah ditetapkan perlulah dimantapkan. (Fakulti Engineering)	

Auditor :   Mani Maaran Krishnan

Date   :   10-Dec-2020

OPPORTUNITIES FOR IMPROVEMENT		
Clause	**Details**	**Comments on action taken**
9.1.1	Penilaian prestasi Penilaian keseluruhan bagi kajian kepuasan pelanggan dapat ditunjukkan dan juga penanda aras minimum bagi penilaian dapat ditentukan. (Pusat Pembangunan Maklumat dan Komunikasi (iDEC))	
8.5.1	Kawalan penyediaan pengeluaran dan perkhidmatan Tempoh masa baik pulih bagi kerosakan/aduan di dalam tempoh warranty dapat ditentukan. (Pusat Pembangunan Maklumat dan Komunikasi (iDEC))	

Auditor :   ELLY NADIA BT CHE AFZAR

Date   :   09-Dec-2020

OPPORTUNITIES FOR IMPROVEMENT		
Clause	**Details**	**Comments on action taken**
7.5.1	**Maklumat didokumentasikan** Maklumat yang didokumentasikan seperti Garis Panduan dan Borang Permohonan Pelupusan Aset (BR039) hendaklah diselaraskan dengan proses semasa yang dilaksanakan untuk proses pelupusan aset. *(Pejabat Bursar)*	

Auditor :   Rajalekshmi Rama Chandram

Date   :   04-Dec-2020

	OPPORTUNITIES FOR IMPROVEMENT	
Clause	**Details**	**Comments on action taken**
8.5.1	**Kawalan penyediaan pengeluaran dan perkhidmatan** a.　Hasil audit mendapati, tugasan berterusan pelajar telah dibangunkan dan dilaksanakan dengan baik, namun begitu rubrik pemarkahan bagi tugasan pelajar boleh dilaksanakan secara konsisten untuk memastikan objektiviti pemarkahan tersebut. – Sampel AKU 3201 – JSHP & ECN 4126-SPE b.　Analisis CLO boleh dilaksanakan secara konsisten bagi menilai keperluan penambahbaikan yang perlu dilaksanakan bagi setiap kursus pada setiap semester. – JSHP & JSTEK c.　Hasil audit mendapati, rekod penyelenggaraan terhadap pengurusan tanaman dan pengurusan akuakultur telah dibangunkan, namun ia boleh dipertingkatkan lagi dengan merekodkan butiran yang terperinci secara konsisten. –(Eg: tarikh, nama pelaksana, masa etc) – TPU, Kampus Bintulu. d.　Rekod pemantauan terhadap aktiviti pengurusan tanaman dan akuakultur telah dibangunkan dan dipantau dengan baik, namun begitu ia boleh ditambahbaik dengan menyatakan justifikasi/komen yang sewajarnya atas tindakan yang telah diambil. – TPU, Kampus Bintulu	
8.5.3	**Harta kepunyaan pelanggan atau penyedia luar** Mekanisma pemeliharaan harta kepunyaan pelanggan boleh dibangunkan dengan sewajarnya dalam memastikan maklumat peribadi tidak disalahgunakan. (Eg: Salinan IC, Transkrip akademik, Pasport etc).- Pusat Antarabangsa & INTROP	

Auditor :　SITI ROSHAIZA BINTI ALI

Date　:　10-Dec-2020

OPPORTUNITIES FOR IMPROVEMENT		
Clause	**Details**	**Comments on action taken**
8.3	**Reka bentuk dan pembangunan produk dan perkhidmatan** Pemberian perkhidmatan kursus-kursus jangka pendek bahasa didapati memuaskan dan penilaian yang diterima daripada pelanggan adalah baik. Walaupun begitu, kawalan bagi pembentukan modul bagi kursus-kursus jangka pendek ini boleh diperkemaskan dari aspek semakan/pengesahan kandungan(*content)* serta kawalan status/versi modul dalam memastikan pemberian perkhidmatan berkualiti itu dapat diberikan secara konsisten. (Rujuk Pusat Pemajuan Kompetensi Bahasa)	

Auditor :   Suri Yati bt Amran

Date   :   10-Dec-2020