

MANAGEMENT SYSTEM STAGE 1 AUDIT REPORT



NEVER STOP IMPROVING

Client's Name:	LBP LEASING AND FINANCE CORPORATION
Report No.	201910001
Date of opening meeting:	24/10/2019
Applicable standard(s):	ISO9001:2015;
This report has been prepared by:	
NQA Assessor:	Rhoda Vi Demesa
Telephone No.	0977-805-7803
Email:	Rhodavi.nqa@gmail.com



Audit Report Part B – Audit Report

Client Information

Primary Contact: Raizza L. Gonzales

Address: 15th Floor Syciplaw Center, 105 Paseo de Roxas Street, Makati City, 1226, Philippines

Contact Tel:

Contact E-Mail: ndcalvez@lbpleasing.com; rgonzales@lbpleasing.com

Billing Contact:

Billing Tel: As above

Billing E-Mail: As above

System integration (integrated audits only): Choose an item.

Additional information on integration if required:

Certificate expiry date(s):

Required changes to EAC or NQA Codes applied: Choose an item.

	At this location	Across all locations (Multisite)
Total Employees		
Repetitive or parallel workers		
Energy Engaged Employees		
Energy Consumption		
Energy Uses		
Energy Sources		

Energy data only applicable for ISO 50001 audits. Further guidance available in ASR 47:2.1

The date of the next audit is:

Click here to enter a start date.
Click here to enter a finish date.

to

Audit Information

Audit Duration (in days): 1.00md

Scope of certification: Scope is appropriate.

Confirmation that audit objectives have been fulfilled: Choose an item

If no, which objectives have not been met.

Note that customers with installation/service activities within their scope must receive a minimum of one on-site visit once per cycle. Failure to achieve this may result in this activity being removed from the client's scope of certification.

NQA Audit Team		Client	Position	Attendance
Lead Assessor	Rhoda Vi B. Demesa	Fidelito Magno	Head-AMG	Opening and Closing
Member 1	n/a	Peter Paul I. Rigor	Team Head - AMG	Opening and Closing
Member 2	n/a	Ian Ramo	Mgt. Service Specialist	Opening and Closing
		Luz Narciso	Compliance Officer	Opening and Closing
		Jimlyn Almene	Account Officer	Opening and Closing
		Noel D. Calve	Head Admin Unit	Opening and Closing
		Raizza L. Gonzales	Head- CSG	Opening and Closing
		Riza M. Hernandez	Head-ASG	Opening and Closing
		Francisco Leonor	President/CEO	Closing

** Mandatory attendance at OHSAS18001 / ISO45001 Audits. If these mandatory positions are not present at closing meeting, record and justify reasons in the Executive Summary.*

Details of Changes		
Type of action or change required	Action Required	Notes
Client Name Change:	<input type="checkbox"/>	
Change of Address:	<input type="checkbox"/>	
Scope Change:	<input type="checkbox"/>	
Contact Change:	<input type="checkbox"/>	
Number of Employees Change:	<input type="checkbox"/>	
Major NCs Raised:	<input type="checkbox"/>	
Special Visit Recommended:	<input type="checkbox"/>	
Other:	<input type="checkbox"/>	

Executive Summary

LBP Leasing and Finance Corporation (A Landbank Subsidiary), formerly LBP Leasing Corporation, a wholly owned subsidiary of landbank of the Philippines was established under the corporation code of the Philippines on March 17, 1983 to complement the product lines being offered by the bank.

LBP Leases leasing facilities make it easier for enterprises to expand, upgrade or modernize their operations. Among others leasing enables enterprises to:

- Match financing terms with the earning potential of the capital asset;
- Preserve working capital and credit lines
- Address existing or current budget limitations; and
- Obtain financing with no collateral

Corporate Mission:

To provide accessible, affordable and responsive non-bank financial services to government offices and LBP borrowers in support of the national Government Agenda.

Corporate Vision

To be among the Top 5 biggest leasing and finance companies in the country by 2022

Products and Services:

1. Leasing Facilities
 - Financial lease
 - Operating lease
2. Financing Facilities
 - Equipment financing line
 - Purchase Orders/Receivables Financing Line
 - Short Term Credit Line
3. Special Financing Programs
 - Special Financing to Support Government Programs
 - Anchor Based Financing Programs
 - Vendor partnership financing programs

Clients:

Small and Medium Enterprises (SMEs); Government Agencies, Offices; Corporations; Financial Institutions; Cooperatives; Institutional Retail Accounts

Maximum Duration of the Process:

Forty-five days from receipt of complete documentation up to final approval by the appropriate approving authority/body i.e. credit committee; executive committee; board of directors

How to Avail of the Services:

1. Walk-in Clients
2. Clients inquiring thru letters or emails

Lease Loan Application Processing:

1. Walk-In Clients - The Account Management Group brief the applicant/client on the following:
 - Products and services
 - Indicative Terms and Conditions
 - Documentary Requirements

2. The Account Management Group prepare applicable lease loan quotation for approval of immediate supervisor. Brief applicant on the documents required as follows:
 - Business information Sheet
 - Checklist of requirements
 - Letter of Application
 - Audited Financial Statements for 3 years with ITR'
 - Latest Interim Financial Statements'
 - Mayor's Permit
 - SEC/DTI/CDA documents

3. The Account Officer shall:
 - Initial review of documents
 - Inquire on prospects funding requirements
 - Discuss LBP Lease product/services that may be suitable to the clients' needs
 - Explain credit application process
 - Advise the client about additional documentation requirements
 - Write reminder letter to client
 - Preliminary evaluation and request for credit checking shall be conducted
 - Undertake evaluation and present account/project to approving body

As a leasing and financing company and a subsidiary of Land Bank of the Philippines, LBP Leasing and Finance Corporation endeavours to deliver quality, accessible, and responsive non-bank financial services to its clients in support of the National Government Agenda.

Confirmed Scope: Provision of Leasing and Financial Services

Exclusion: Clause 8.3 Design and Development & 7.1.5.2 Measurement Traceability

Applicability of industry and scheme code: – EAC: (QMS)

Good Points:

1. The organized filing of documents and records was a good practice.
2. The clean and organized offices were commendable.
3. The provided means of communication related to information dissemination of quality policy and other relevant information were noteworthy.
4. The readiness of QMS documents and records was a good practice.
5. The active participation of all concerned personnel in preparation for this audit was commendable.

- **This visit was satisfactory, however Areas of Concern have been raised, action is required prior to the stage 2 audit.**
- **Areas of Concern have been identified. Any findings are as detailed on the following page(s).**

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The following post-audit action(s) shall be taken by the client: Choose an item.

Major NCs	0	Minor NCs	0	OFIs	0	AoCs	7
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Is there any conflict of interest which exists between the Auditor(s) and the client, and are there any situations known to them that presents themselves, or NQA, with a potential conflict of interest in respect to the audit undertaken.

Choose an item

Audit Findings

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Ref No.	Clause No.	Details of any finding(s) raised.	Type (Major NC, Minor NC, OFI or AoC)
01	5.2	Need to ensure that documented and posted Quality Policy has top management's signatory as a sign of commitment.	AoC
02	6.1	Need to identify other internal/departmental risks for the following areas/processes: e.g. Top Management, Internal Audit, DCC, Procurement, Supplies/resources monitoring	AoC
03	6.2	Need to consider other relevant functions and levels and processes of the organization in setting of framework for Quality Objectives and Programs (LLC-QMS-PM-012.00) aside from core processes e.g. Top Management DCC Internal Audit Purchasing Supplies/Resources Control	AoC
04	7.5.2	<ol style="list-style-type: none"> 1. Need to revisit the Control of Documented Information procedure to reflect the use sticker/label and the orientation of this identification on Document Code (upper right/lower right corner of document). 2. Need to revisit the procedures and records to check for the consistency and identification of the effectivity date. e.g. January 10, 2019 s(Document), January 15, 2019 (DCARRF) – Control of Documents - 2019 Quality Objectives and Programs (no effectivity date, page number)	AoC
05	7.5.3	<ol style="list-style-type: none"> 1. Need to include all departmental external documents on the Master list of External Documents. 2. Need to indicate date of update on the Master List of Records and reflect form number of this document 	AoC
06	9.3.2	Need to ensure reflecting/standardizing other management review inputs taking into consideration the following inputs: <ol style="list-style-type: none"> a) Status of actions from previous management review b) Information on the performance and effectiveness of QMS; c) Need to include the results of external audit on the next management review(s) 2. Need to omit the term "preventive action" on the future documentations since it has already been replaced by "planning of actions to address risks and opportunities	AoC
07	9.3.3	Need to reflect/standardize the management review outputs that shall include decisions and actions related to <ol style="list-style-type: none"> a. Opportunities for improvement b. Any need for changes to the QMS c. Resource needs 	AoC
End of Findings			
Note: Responses to findings must be sent using the Corrective Action Plan form, as applicable, to caps@nqa.com within the timeframes stated on Page 4.			

Management system performance; such as trends in audit findings that require further investigation at the next recertification audit.

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Mandatory completion at the Head Office Audit of Surveillance Year 2

Detail that the previous recertification (or stage 2), surveillance 1 and surveillance 2 results have been reviewed and whether there are any trends in non-conformities or other issues which require further investigation at the next recertification audit.

Closure of Findings from Previous Audit:

Report No. 123456, Dated [Click here to enter a date.](#)

Ref No.	Detail of finding and client action			Outcome (Closed or Escalated)
	Clause	Category	Summarise Action(s) Taken to Prevent Recurrence	
01		Choose an item	n/a for stage 1 audit	Choose an item
02				Choose an item
03				Choose an item
04				Choose an item

Opening/Closing Meetings:

Opening and closing meetings were performed in accordance with NQA Form 335. The objective of the audit was to confirm that the management system had been established and implemented in accordance with the requirements of the audit standard.

Confirmed Company Name: LBP LEASING AND FINANCE CORPORATION

Confirmed Office Address: 15th Floor Syciplaw Center, 105 Paseo de Roxas Street, Makati City, 1226, Philippines

Confirmed Scope: Provision of Leasing and Financing Services

Process/audit area:	Site Tour
Auditees:	Raizza L. Gonzales
Auditor (if applicable):	Rhoda Vi Demesa
Evidence to support audit conclusion:	
Verified work environment LBP's offices: <ol style="list-style-type: none"> 1. Meeting Room A, B, C 2. Oversight Offices 3. OP 	

4. DCC
5. CSG
6. AMG
7. Remedial Account Mgt. Unit
8. Personnel Admin Unit
9. Risk and compliance
10. IT Unit
11. ASG
12. Credit investigating and appraisal unit
13. Secured room – with vault
14. Mini Library
15. Employees Lounge
16. Locker Rooms
17. Comfort Rooms
18. Legal Services Unit
19. Accounting Unit
20. Filing Room
21. Treasury Services
22. Supplier Room
23. Reception
24. Citizen's charter area with TV

Others:

With scratch paper bins

Fire Extinguishers

Signages

Fire Alarm

Megaphone with flashlight

Medicines

Communication Board – Office Circulars

Clean and organized workspace.

Conclusion of the overall effectiveness of the process

Choose an item

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Process/audit area:	Organisational Context (External / Internal issues /interested parties / boundaries and scope / process identification)			
Auditees:	Raizza Gonzales			
Auditor (if applicable):	Rhoda Vi Demesa			
Evidence to support audit conclusion:				
Internal and External Issues Log (LLC-QMS-PM-009.00), Rev.0 Effectivity Date: 12/20/2018				
Internal Issues:				
Factors	Issues	Process to Monitor and Review	Process Owner	Monitoring Tool
A. Knowledge	Competency gap affecting employees job performance	Personnel development	CSG Head and concerned group	Competency Assessment form
	Lack of Awareness of Policies and Guidelines (Functional/Job related affecting employees job performance)	Personnel development On the Job Orientation	CSG Head and concerned group	Competency Assessment form Orientation Acknowledgement Form
	Lack of awareness of policies and guidelines (Administrative) resulting to noncompliance	Personnel recruitment Orientation on Admin Policies and Procedures	CSG Head	Orientation Acknowledgement Form
B. Performance	Lack of Aggressive marketing strategies resulting to non-achievement of targets	Account Generation	AMG Head	Credit Application Monitoring AMG Marketing Report
	Inability to collect from clients to pay-off borrowings resulting to non-achievement of targets	Account Generation	AMG Head, RAMU Account Officer	Asset Quality Report
C. Values	Inappropriate work ethics resulting to poor performance of	Account Management, Remedial Accounts	CSG Head and concerned Group Unit Heads	SPMS, Customer Satisfaction Survey Results

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	employees			
D. Stability of Work Force	Lack of Manpower resulting to non-achievement of targets	Personnel Devt	CSG Head and concerned Group Unit Heads	Monthly monitoring Filled and Unified Plantilla Postions
E. Employee Needs and Expectations	Availability of employee feedback mechanism to increase employee engagement	Personnel Devt	CSG Head and concerned Group Unit Heads	SPMS
F. Infrastructure	Availability of IT Infrastructure to support operations	Personnel Devt	IT Unit	Accomplishment Report on IT Projects
G. Financial Viability	Limited geographic reach hampers ability of the corporation to cover larger market base Support of LBP being the mother bank for funding requirements	Account Generation, Fund Sourcing and Management	AMG Head, Treasurer	Portfolio Report per area, Available Credit Lines

EXTERNAL ISSUES

Factors	Issues	Process to Monitor and Review	Process Owner	Monitoring Tool
A. Political	Political aspect on abolition of non-performing GOCCs threatens existence of the corporation	Corporate Performance Review & monitoring	President	Accomplishment
	Implementation of Govt. devt programs opening more business opportunities for the corp	Account Generation	AMG Head	Portfolio Report
B. Economic	Increasing interest rates resulting to higher borrowing cost and lower net income	Fund Sourcing and Mgt.,	Treasury Head,	Portfolio Report

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	Demand for improved govt. services and countryside devt. Opening business opportunities for the corp.	Account Generation	AMG Head	
C. Social	Unsatisfied customers will negatively affect image of corp. to its existing and prospective customers	Mgt. Review	President	Customer Satisfaction Survey
D. Technology	High Availability of Internet access to improve mobility in work, Inability to tap available technologies to increase employee productivity and to make services more accessible to customers	Information Technology	IT Officer	Information System Strategic Plan
E. Legal	New regulatory issuances may adversely affect business of the corp.	Compliance Mgt	Compliance Head	Business Unit Compliance Action Plan (BUCAP), Status Update Form
	Legal Cases filed may not yield positive results exposing the corporation to possible losses	Legal Evaluation, Action and Representation	Legal Counsel	Status Report on Legal Cases
F. Environment	Increasing competition from banks and other bigger financial institutions resulting to non-achievement of targets	Mgt. Review	Mgt. Committee	Report Industry Standing
	High availability of service providers enabling the corporation to get highly qualified service	Fleet mgt.	Admin Head	Performance Evaluation for Suppliers



	providers			
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Opportunities Register

1. Fast development in areas outside metro manila will open more business opportunities for LLFC
2. Govt. agencies will tap services of LLFC because of tedious Govt. procurement process
3. Huge number of small and medium enterprises
4. Faster approval process
5. Build customer relationship and generate additional business from existing clients
6. Increase in govt. spending to fund devt. Projects being implemented will open more business opportunities
7. LBP-LLFC Complementation Access to LBP clients
8. Availability of technologies to improve reliability of business
9. Increasing Internet connectivity to support cloud-based resources application
10. Improve procedures and clear delineation of responsibilities
11. Availability of training packages from various training institutions

Risk Register

1. Client Relationship Management Risk – Unprofessional manner of delivering services to clients
2. Marketing Risk – inability to articulate a compelling and consistent message that underlies the corporation image
3. Sales Business growth – Poor marketing strategies and resource allocation
4. Product Pricing Risk – Failure of the corporation to price its products correctly or competitively
5. Anti-money laundering act – Failure to conduct know your customers procedures or relevant information not disclosed by primary
6. Contract Risk – Negligence of Bank employees in performing their duties and responsibilities
7. Compliance Risk – Inaccurate reporting

2019 Quality Objectives and Programs (LLC-QMS-PM-012.00), Rev.0, effective date: ____), no. strategic objectives, quality performance measurement, target, process, activities, responsible, target date of completion, resources needed, monitoring tool

1. Account Generation – Ensure viability and financial growth, measurement: Increase total portfolio, Target: 4.125B,
2. Accounts Management remedial Accounts Management – Ensure viability and financial growth, measurement: net past due rate, target: 2.5% NPDR,
3. Account Generation – Ensure viability and financial growth, measurement: increase asset size, Target:

P5.360B,

4. Account Generation; Account Management; Treasury Services – consistently improve profitability, measurement: Increase Net Income After Tax (NIAT), target: Actual NIAT for CY 2019 of P126M,
5. Account Generation – Provide affordable and responsive financial products for priority sectors, target: 80% of total portfolio
6. Administrative Services – Improve accessibility and timeliness of delivery of leasing and financing solutions, measurement: percentage of satisfied customers, target: 95% of respondents to survey
7. – Streamline credit processing system, measurement: credit approval processed within applicable time, target: 100% of credit applications processed within applicable processing time
8. All business processes – Continuous improvement of processes and systems, measurement: implement QMS, target: ISO certification
9. Human Resource Management – ensure availability of required competencies for critical positions, measurement: percentage of employees meeting required competencies, target: address and close competency gaps of 100% of employees based on 2018 yearend assessment
10. IT Administration – optimize use of IT, measurement: implementation of IT projects, target: 100% completion of ISSP

Business Process Map LLC-QMS-PM-007.00, Rev.0, Effective date: 12/20/2018

Quality Manual, LLC-QMS-PM-005 Rev.00, effective 01/15/2019

Table of Organization 2019

List of Regulatory Reports and Requirements – From BSP, AMLA, SEC, GCG, BIR, DOLE, City Hall

Functional Description of Groups/Offices/Units

Contract Review:

SEC Reg. No.: 111115 LBP Leasing Corporation, filed last December 13, 1982, registered last March 17, 1983

Certificate of Filing of Amended by Laws: LBP Leasing and Finance Corporation (formerly LBP Leasing Corporation) November 03, 2015

Certificate of Authority No. 042, to operate as financing company in accordance with the Financing Company Act Of 1998 (RA 8556) and its IRR, 15th Floor SycipLaw Center, 105 Paseo de Roxas Street, Makati City, sealed December 08, 2015.

Amended by-laws of LBP Leasing and Finance Corporation (As amended on September 24, 2014)

Management Review dated May 14, 16, & 23 2019



Audit Report Part B – Audit Report

Topics:

1. Changes in Internal & External Issues
2. Customer Satisfaction Survey
3. Attainment of Quality Objectives (1st qrtr 2019 scorecard)
4. Process Performance (Action Plan to set Standards)
5. Conformity of Products and Services
6. Nonconformities & Corrective Action
7. Monitoring and measurement results (IQA NCs pertaining to control points)
8. IQA Audit Results
9. Performance of External Providers
10. Adequacy of resources
11. Effectiveness of Actions Taken to address risks and opportunities
12. Opportunities for improvement - per dept.

Internal Audit- Luz M. Narciso QMS Internal Audit Team Leader

Annual Audit Plan 2019

Audit Notice 2019

Audit Plan 2019

Audit Checklist 2019

Audit Result Reports 2019

Summary of Audit Findings 2019

RFA Summary 2019

OFI Summary 2019

Processes	# of Processes	C	NC	OFI
Core	22	76	5	33
Support	27	115	4	37
Management	11	22	5	8
Total	60	213	14	78

Conclusion of the overall effectiveness of the process

Findings have been identified.



Audit Report Part B – Audit Report

Process/audit area:	Documents and Records Control
Auditees:	Ianthe Remo
Auditor (if applicable):	Rhoda Vi Demesa
Evidence to support audit conclusion:	
<p>Document Creation Addition Revision Request Form (DCARRF)- effectivity date: Jan. 15, 2019, Creation Control of Documented Information Control of Documents – LLC-QMS-PR-001.00, REV. 0, Effective Date: 1/10/2019, Raizza L. Gonzales – Process Owner, date of submission: 7-Jan-2019</p> <p>This procedure covers the creation, generation, review, approval, registration, distribution, retrieval, retention, maintenance, protection, deletion and disposition of internally and externally sourced documents.</p> <p>2.4.2 Every page of the approved original documented information shall be stamped with a master file stamp with only the first page initialled by the DC – 1st page only has been decided to be initialled</p> <p>q. stamps retrieved copies of revised document as obsolete copy.</p> <p>Records: Document Creation Addition Revision Request Form (DCARRF)- Master List of Controlled Documented Information Master List of Controlled Copy of Distribution and Retrieval List Master List of Uncontrolled Copy Distribution List Master List of External Documents Master List of Obsolete Controlled Documented Information Document Reproduction Request Form RA 9470 or the National Archives of the Philippines Act of 2007</p> <p>Master List of Records (No form Number) Corporate Services Group 3 years Legal Service Unit - 5 years Management Services Unit – permanent, 5 years, 1 year, 6 years ASG Accounts Adm Insurance – 5 years after termination or fully settled ASG Accounts Adm Accounting Unit Administrative Unit Internal Audit Office Compliance Office Risk Management Office Account Management Group</p>	
Conclusion of the overall effectiveness of the process	
Process / Audit Area satisfactory.	



Audit Report Part B – Audit Report

Process/audit area:	Recertification Review		
Auditor (if applicable):			
Evidence to support audit conclusion:			
The following NQA reports were reviewed:			
Report No.			
Standards;			
Location:			
Date;			
Major;			
Minor;			
OFI			
Report No.			
Standards;			
Location:			
Date;			
Major;			
Minor;			
OFI			
Review Conclusion:			
<ul style="list-style-type: none"> • Have all relevant clauses of the standard been assessed over the certification cycle?: Choose an item • Are policy commitments and objectives deemed to be being achieved?: Choose an item • Have all NCs raised over the certification cycle been adequately closed and prevented from recurring?: Choose an item • Are there any trends of significant concern in the findings raised over the three year period?: Choose an item • Is the company’s commitment to maintain the effectiveness and improvement of the management system in order to enhance overall performance evident?: Choose an item • Is there suitable justification for excluded / inapplicable clauses?: Choose an item • Has the scope of registration been verified as correct/incorrect?: Choose an item • Have all site visits been undertaken to plan?: Choose an item • Is the management system in its entirety is considered to remain relevant and effective and applicable to the scope of registration?: Choose an item 			
Conclusion:			
Choose an item			



Audit Report Part B – Audit Report

Use of Registration Marks and Logos

Use of Registration Mark (if used) is in accordance with the Rules of Registration	N/A

Example of the current NQA logos:

ISO 9001 (UKAS Accredited)



ISO 9001 (UKAS Accredited) with 'UKAS Tick and Crown'



More information can be found at: <https://www.nqa.com/en-gb/clients/logo-library>

Our logos have recently been refreshed with a new design. This does NOT mean you need to change them, but bear in mind for next time a change is due. The new designs can be downloaded from our website

If there are inaccuracies, errors or queries regarding this report or audit findings, please contact NQA Head Office on 0800 052 2424 within five working days of the closing meeting

End of Audit

Audit Plan

This plan relates to the next Choose an item.

Relevant Standard/Supporting Documentation: ISO9001:2015; ISO14001:2015; BS OHSAS 18001:2007; ISO45001:2018; SSIP; ISO50001:2011; ISO27001:2013; ISO22301:2012; NHSSXX

Member/ Role		Member/ Role	
Date		Date	
Time	Location/Department/Function	Time	Location/Department/Function
09.00	Opening meeting		
09.30	Close out of previous findings		
10.00			
10.30	Interviews, to include*:		
11.00	<ul style="list-style-type: none"> • Management legally responsible for Occupational Health & Safety, • Personnel responsible for monitoring workers health, • Employees representatives (with responsibilities for OHS). • Managers and permanent and temporary employees 		
11.30			
12.00			
12.30	Shift / Remote Working**:		
13.00	<ul style="list-style-type: none"> • Audit Plan to include non-core shift working, where applicable • Audit Plan to include auditing of remote workers, where applicable 		
13.30			
15.00			
15.30	Report preparation		
16.30	Closing meeting		
Completed by		Timings and content may be subject to change	

* Mandatory interviews at OHSAS18001 / ISO45001 Audits. If these mandatory interviews are not undertaken, record and justify reasons in the Executive Summary & state that not all objectives have been met.

** Mandatory for OHSAS18001 / ISO45001 Audits

The objectives of the audit will be:

- To confirm that the management system had been established implemented and maintained in accordance with the requirements of the audit standard.
- To evaluate the ability of the management system to ensure the client organisation meets applicable statutory, regulatory and contractual requirements. Note: A management system certification audit is not a legal compliance audit.
- To evaluate the effectiveness of the management system to ensure it is continually meeting its specified objectives
- To identify as applicable, areas of the management system for potential improvement.

The audit scope describes the extent and boundaries of the audit, such as physical locations, organisational units, activities and processes to be audited.

Where the initial or re-certification process consists of more than one audit (e.g. covering different locations), the scope of an individual audit may not cover the full certification scope, but the totality of audits shall be consistent with the scope in the certification document.



Audit Report Part D – Audit Matrix

Relevant Standard/Supporting Documentation:	ISO9001:2015; ISO14001:2015; BS OHSAS 18001:2007; ISO45001:2018; SSIP; ISO50001:2011; ISO27001:2013; ISO22301:2012; NHSSXX
<ul style="list-style-type: none"> • This audit programme is to be prepared by the Lead Auditor at the completion of the Stage 2 audit or the Recertification audit. It should be replicated in all subsequent surveillance visit reports. • Where an element(s) of the programme cannot be completed at a given visit the programme shall be amended and up-issued accordingly to ensure coverage at the following visit. • Site visits are to be included in the programme with a clear indication as to the processes intended to be sampled. 	

Type of visit	Stage 1	Stage 2	Surveillance 1	Surveillance 2	Recertification
Visit Due Date (MM/YY)					
Mandatory Elements / Selected Processes	Processes to be audited during visits are to be indicated with a cross (X). All processes are to be audited during a three-year certification cycle excluding the re-certification visit.				
Context of the organization					
Leadership					
Planning					
Support					
Performance evaluation					
Improvement					
Use of marks and references to certification / Client website					
Site Tour					
Operations Processes (specify from scope)					
•					
•					
•					
•					
•					
•					
•					
Off Site Processes for review at Site Visits (Specify)					
•					
Non-Core Shifts to be Audited (non-core shifts to be audited minimum of 1 per cycle)					
•					
Client Locations to be visited (Specify)					
•					
•					

Audit trails will be developed based upon identified risk throughout the audit and as such timings and content may be subject to change.
 Where the client operates shifts, the activities that take place during shift working shall be considered when developing the audit programme



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Connect with NQA on LinkedIn, engage with our professional network, access knowledge, gain insights and opportunities.
www.linkedin.com/company/nqa-global



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