



NQA MANAGEMENT SYSTEMS RECERTIFICATION PROCESS AUDIT REPORT

LANDBANK LEASING & FINANCE CORPORATION

VISIT NUMBER:

5

**DATE OF OPENING
MEETING:**

28/11/2022

**THIS REPORT HAS
BEEN PREPARED BY:**

REGIONAL ASSESSOR:

Rhoda Vi Demesa

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APPLICABLE STANDARD(S):

ISO 9001:2015





AUDIT REPORT PART A - EXECUTIVE SUMMARY

Client Information

Primary Contact:	Raizza L. Gonzales, Noel Calvez		
Address:	15 th Floor Syciplaw Center, 105 Paseo de Roxas Street, Makati City, 1226, Philippines		
Contact Tel:	02-8182200		
Contact Email:	ndcalvez@lbpleasing.com ; rlgonzales@lbpleasing.com		
Billing Contact:	As above		
Billing Tel:	02-8182200		
Billing Email:	As above		
Audit Conducted at:	Head Office <small>(multi-site certification)</small> <input type="checkbox"/>	Participating / Temporary Site <small>(multi-site certification)</small> <input type="checkbox"/>	Single Site Certification <input checked="" type="checkbox"/>
Audit Conducted as:	Fully On-Site <input checked="" type="checkbox"/>	Split On-Site / Remote <input type="checkbox"/>	Fully Remote <input type="checkbox"/>
System integration (integrated audits only):	N/A		
Additional information on integration (if required):	N/A		
Certificate expiry date(s):	13 December 2022		
Required changes to EAC or NQA Codes applied:	No changes required		

	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: 27/11/2023 to 27/11/2023



AUDIT REPORT PART A - EXECUTIVE SUMMARY

Audit Information

Audit duration (in days): 2.00

Scope of certification: **Provision of Leasing and Financial Services**
Scope is appropriate.

Confirmation that audit objectives have been fulfilled: All objectives met.

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	Michael Araanas	President/CEO	Opening and Closing
Member 1	Teresita D. Aquino	Raizza L. Gonzales	Head- CSG	Opening and Closing
Member 2	n/a	Riza M. Hernandez	Head - ASG	Opening and Closing
		Peter Paul I. Rigor		Opening and Closing
		Noel D. Calvez	Manager	Opening and Closing
		Luz Narciso	Head-Internal Audit	Opening and Closing
		Angelique D. Javier	Mgt. Services	Opening and Closing
		Melody Mercado	IT Officer	Opening and Closing
		Mariette Tan	Acct. Admin Unit Head	Opening and Closing
		Susan Magno	Acct. Admin Officer	Opening and Closing
		Ben N. Solacito	Appraiser	Opening and Closing
		Keneth S. Sta. Rosa	Acctg. Head	Opening and Closing
		Ian Ll. Ramo	Mgt. Service Specialist	Opening and Closing
		Jimlyn Almene	AO	Opening and 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"/>	



AUDIT REPORT PART A - EXECUTIVE SUMMARY

Executive Summary

SUCCESSFUL AUDIT:

The organisation's context is well defined, leadership has been effectively demonstrated and commitment levels are evident.

This is reflected in the levels of compliance with requirements and operational control evident at the organisation during the audit process.

The availability of documented information to demonstrate that the system is well implemented and well understood throughout the organisation is acceptable.

This audit has involved a review of system administration activities, a review and sample of site activities as well as review of job-related records.

It was not fully evident that the key policy commitments are being adhered to.

Grateful thanks are passed to LLFC for their time, assistance and hospitality during this audit.

It should be noted that this audit report is based on a sample basis

a fully comprehensive audit has not been undertaken.

Good Points:

1. The Top Management's commitment in implementing the Quality Management System is commendable.
2. The improvement on the Management Review Inputs with inclusion of external audit findings such as the NQA, BSP and COA in the Audit Results of the Management Review is a good practice.
3. The exceeded target score to meet from GCG, with the Agency receiving 98% overall satisfaction score from its customers, with 92% feeling very satisfied and 6% feeling satisfied is commendable. (Interview Dates: Sept. 7 to October 13, 2022).
4. The identification and updating of the internal and external issues is a good practice.
5. The positive comments obtained from the latest Customer Satisfaction Survey is noteworthy such as but not limited on the following:
 - "Accommodating, Considerate and understanding, Maasikaso";
 - "Responsive and Efficient: requests are immediately approved, fast approval of loans, inquiries are immediately answered, calls to hotlines are immediately answered-isang dial lang may sasagot agad; punctual in meetings, gives updates, low interest rate-2%, etc.
6. The conducting of the Internal Auditors' Performance Evaluation for the IQA Team Head and Members is a good practice.
7. The internal refresher training conducted for the Internal Auditors on ISO 19011:2018 Guidelines for Auditing Management is a good practice.
8. The monitoring of trend of internal and external audit findings is a good practice.
9. The well-maintained and well-organized records of the Account Management Group and Account Servicing Group/Administration Unit are commendable.
10. The improvement and registration made on the Document Checklist for ROPA Endorsement Form and other 2022 new and revised documents are commendable
11. The monitoring of Legal and other Requirements is noteworthy.
12. The actions being taken on the results of Customer Feedback is a good practice.
13. The active participation of all the Auditees during the audit is noteworthy.
14. The conducting of Enterprise Risk Management (ERM) – Bowtie Analysis is a good practice.

Major NCs	0	Minor NCs	0	OFls	5	AoCs	0
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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 present themselves, or NQA, with a potential conflict of interest in respect to the audit undertaken?	No.
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Audit Conclusion

- This visit was Satisfactory: Continuation or granting of certification is recommended
- Opportunities for Improvement have been identified
- Any findings are as detailed on the following page(s).

Audit Follow-up Actions

The following post-audit action(s) shall be taken by the client: OFIs to be considered and action taken when appropriate.

Please note that certification will not be granted, reissued or revised until all outstanding Non-Conformance responses have been submitted, and in the case of Major Non-Conformances, the evidence of corrective action has been provided to, and accepted by, NQA.

For further information, useful guidance and further support for responding to audit findings, please visit <https://www.nqa.com/en-gb/clients/non-conformities>

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

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.



AUDIT REPORT PART B – AUDIT REPORT

Audit Findings

Ref No.	Clause No.	Details of any finding(s) raised.	Type (Major NC, Minor NC, OFI or AoC)
01	Q: 9.3.2	Ensure to follow the management review inputs heading as required to not confused with the data to be reflected: e.g., it should be “Nonconformities and Corrective Actions” – instead of Nonconformities and Conformity of Products and Services” which should be “ “Process Performance and Conformity of Products and Services”, should be “Customer Satisfaction and Feedback from Relevant Interested Parties” than separating them as “Customer Satisfaction” and “Relevant Interested Parties”.	OFI
02	Q: 9.3.3	Ensure to follow the required sequence of the outputs of the Management Review.	OFI
03	Q: 6.2	Consider reflecting and/or separating the column for the “Remarks” if the Quality Objectives have been “Achieved” “Ongoing” or “Not Achieved”. Some have remarks as “Ongoing” while others were updates.	OFI
04	Q: 9.2.2	<ol style="list-style-type: none"> 1. Consider reflecting the same processes reflected on the Special Order (e.g. 22-012 s.2022) into the Internal Quality Audit Program (LLC-QMS-FR-003.01). 2. Ensure reflecting the Risks and Opportunities in the Internal Quality Auditing (QMS Procedures LLC-QMS-PR-004.02, Rev. 2, Effectivity Date: 09/01/2020) 	OFI
05	Q: 7.4	Need to ensure that the process owners/performers are aware of the documented risks, how these were assessed and being mitigated.	OFI
06	Q: 7.5	Document Control: <ol style="list-style-type: none"> 1) Consider to revisit the Control of Records and Control of Documents Procedure e.g. on retention, maintenance & protection of documented Information are documented on the Control of Documents Procedure; 2) Need to establish control of soft copy to ensure that only controlled copies are circulated. 	OFI
07	Q: 7.1.3	Preventive Maintenance: Consider to revisit the ICT Maintenance Plan for IT to include a column for Plan versus actual dates conducted.	OFI
08	Q: 8.4	Procurement: Need to analyse the results of Supplier Evaluation e.g. trends of Supplier/Service Provider Performance.	OFI
09	Q: 8.5	Credit Investigation: Consider to improve the Monthly Monitoring of Request for Credit Investigation, Inspection and Validation to reflect the status of requests.	OFI
		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 5.

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