



# NQA MANAGEMENT SYSTEMS SURVEILLANCE1 PROCESS AUDIT REPORT

## LANDBANK LEASING & FINANCE CORPORATION

**VISIT NUMBER:**

2023-12-04-1

**DATE OF OPENING  
MEETING:**

04/12/2023

**THIS REPORT HAS  
BEEN PREPARED BY:**

**REGIONAL ASSESSOR:**  
RHODA VI B. DEMESA

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**APPLICABLE STANDARD(S):**

Quality Management System ISO 9001:2015





# AUDIT REPORT PART A - EXECUTIVE SUMMARY

## Client Information

|   |   |  |   |
|---|---|--|---|
| <b>Primary Contact:</b>                                     | Raizza L. Gonzales, Head- CSG   |  |   |
| <b>Address:</b>   | 15 <sup>th</sup> Floor Syciplaw Center, 105 Paseo de Roxas Street, Makati City, 1226, Philippines |  |   |
| <b>Contact Tel:</b>   |   |  |   |
| <b>Contact Email:</b>                                       | <a href="mailto:rlgonzales@lbpleasing.com">rlgonzales@lbpleasing.com</a>                          |  |   |
| <b>Billing Contact:</b>                                     | As above  |  |   |
| <b>Billing Tel:</b>   |   |  |   |
| <b>Billing Email:</b>                                       | As above  |  |   |
| <b>Audit Conducted at:</b>                                  | Head Office (multi-site certification) <input type="checkbox"/>                                   | Participating / Temporary Site (multi-site certification) <input type="checkbox"/> | Single Site Certification <input checked="" type="checkbox"/> |
|   | <b>Audit Conducted as:</b>  | Fully On-Site <input checked="" type="checkbox"/>                                  | Blended (On-Site / Remote) <input type="checkbox"/>           |
| <b>System integration (integrated audits only):</b>         | N/A   |  |   |
| <b>Additional information on integration (if required):</b> |   |  |   |
| <b>Certificate expiry date(s):</b>                          |   |  |   |
| <b>Required changes to EAC or NQA Codes applied:</b>        | 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:** 04/12/2024 to 04/12/2024



# AUDIT REPORT PART A - EXECUTIVE SUMMARY

## Audit Information

|  |  |   |      |
|--|--|---|------|
| <b>Total audit duration (in days):</b> | 2.00 mds   | <b>Duration conducted remotely (in days):</b> | 0.00 |
| <b>Scope of certification:</b>         | <b>Provision of Leasing and Financial Services</b> |   |      |
|  | Scope is appropriate.                              |   |      |

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

*If no, which objectives have not been met including if remote auditing issues prevented the full completion of audit. 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          |
|----------------------|--------------------|-----------------------------|-------------------------|---------------------|
| <b>Lead Assessor</b> | Rhoda Vi B. Demesa | Michael Aranas              | President/CEO           | Opening             |
| <b>Member 1</b>      | Teresita D. Aquino | Raizza L. Gonzales          | Head- CSG               | Opening and Closing |
| <b>Member 2</b>      | n/a                | Riza M. Hernandez           | Head - ASG              | Opening             |
|                      |                    | Peter Paul I. Rigor         | Head AMG                | Opening and Closing |
|                      |                    | Emily C. Capili             | Risk Officer            | Opening             |
|                      |                    | Luz Narciso                 | Head-Internal Audit     | Opening             |
|                      |                    | Angelique D. Javier         | Admin Specialist        | Opening and Closing |
|                      |                    | Ilanthe Ll. Ramo            | Mgt. Service Specialist | Opening and Closing |
|                      |                    | Atty. Ed Vincent Albano III | Head OGC                | Opening             |
|                      |                    | Rona Guevarra               | Executive Assistant     | Opening and Closing |
|                      |                    | Zenith Talaban              | CSG Accounting          | Opening and Closing |
|                      |                    | N. A. Ordonez               | RM Office               | Opening and Closing |
|                      |                    | Rojas, Nessie               | IT                      | 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"/> |       |



# AUDIT REPORT PART A - EXECUTIVE SUMMARY

|                             |                          |  |
|-----------------------------|--------------------------|--|
| Contact Change:             | <input type="checkbox"/> |  |
| Number of Employees Change: | <input type="checkbox"/> |  |
| Major NCs Raised:           | <input type="checkbox"/> |  |
| Special Visit Recommended:  | <input type="checkbox"/> |  |
| Remote Audit Issue:         | <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 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 to implementing the QMS is commendable.
2. The attended refresher training on ISO 9001:2015 last October 2023 is a good practice.
3. The review and improvement made on the QMS documentation is a good practice.
4. The improvement made in the Management Review inputs and outputs is commendable.
5. The good results of the Customer Satisfaction Survey with a 98% overall satisfaction score from its customers is commendable.
6. The regular conducting of the internal audit is noteworthy.
7. The well-organized records of the Account Management Group for the sampled Government Accounts are noteworthy.
8. The well-rounded use of the Table of Contents/Contents Checklist by the Account Servicing Group and Account Administration Unit is noteworthy.
9. The improvements made on the previous NQA audit findings are good practices.
10. The reconstitution of the QMS Team is a good practice.

|                  |          |                  |          |             |          |             |          |
|------------------|----------|------------------|----------|-------------|----------|-------------|----------|
| <b>Major NCs</b> | <b>0</b> | <b>Minor NCs</b> | <b>0</b> | <b>OFls</b> | <b>7</b> | <b>AoCs</b> | <b>0</b> |
|------------------|----------|------------------|----------|-------------|----------|-------------|----------|

|   |                       |
|---|-----------------------|
| 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. | <i>Choose an item</i> |
|---|-----------------------|



### 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<br>(Major NC, Minor NC, OFI or AoC) |
|------------------------|-----------------|---|--|
| 01                     | 6.2             | Consider setting quality objectives for other functions/levels e.g. Govt. Accounts, Special Programs, Extension Services, Account Servicing Group, Account Administration Unit, Credit Investigation Unit, etc.   | OFI                                      |
| 02                     | 9.2             | Consider aligning the internal audit forms with ISO 19011:2018 Guidelines for Auditing Management Systems.  | OFI                                      |
| 03                     | 10.2            | Ensure implementing the Root Cause/s (Ask Why Five Times) column of the RFA. RFA records with identified root causes reflect only one (1) cause and one (1) corrective action/s.  | OFI                                      |
| 04                     | 7.1.3           | With established daily, monthly and quarterly maintenance, but need to establish Annual Preventive Maintenance for the facilities.  | OFI                                      |
| 05                     | 6.1.1,<br>6.1.2 | <ol style="list-style-type: none"> <li>1) Need to establish Risk Assessment for Credit and Investigation Unit, and HR to be checked next Audit.</li> <li>2) Risk assessment of Preventive Maintenance for IT/facility-need to strengthen, ensure to evaluate the risk identified, evaluate and measure the effectiveness of the Action</li> </ol>   | OFI                                      |
| 06                     | 7.5             | <ol style="list-style-type: none"> <li>1) Review the submission date of Effectivity and date of registration of DCARRF e.g. Supplier/Service Provider Accreditation Evaluation LCC-CSG-FR-124.00 effective 9/19/2022: submission October 18, effectivity 9/19/2023, Oct 19, 2023 DCC reg.</li> <li>2) May consider reviewing the process of revision of documented information, based on the interview of some departments, the document no. revision changes every time they revise a document.</li> </ol> | OFI                                      |
| 07                     | 7.2             | With training plan but need to be specific in actual. The actual training is general ex—1st quarter fellowship program, women's month celebration, etc.   | OFI                                      |
| <b>End of Findings</b> |                 |   |  |

**Note: Responses to findings must be sent using the Corrective Action Plan form, as applicable, to [caps@nqa.com](mailto:caps@nqa.com) within the timeframes stated on Page 5.**

# ONGOING SUPPORT SERVICES

## Training promotions and complimentary e-learning

As an NQA client, enjoy discounted training courses and complimentary access to our portfolio of e-learning courses.



APPROVED TRAINING PARTNER

## Support through free webinars

Join one of our many free webinars discussing standards, improvement and industry topics. Use our webinars to help you improve your knowledge and understanding and engage with our subject matter experts.

## PR and marketing support

Help to promote your press releases, blogs and case studies along with complimentary vehicle stickers for vans and HGV's. Use the NQA Certified logo to promote your certification.

## InTouch and legal updates

Registration to a monthly e-zine from NQA. Translating the language of standards, management systems and certification through articles covering best practices, tools and techniques and alerts on latest environmental and health & safety legislation.

## Trusted partners

Our Associate Partner Programme is designed to put you in touch with third party independent consultants and software providers that can support you through every step of your certification journey.



NQA certified clients are authorized and encouraged to use NQA logos to promote their certification achievements.

**Access all NQA logos here:**

<https://www.nqa.com/en-gb/clients/logo-library>



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