

Audit Report

POLITEKNIK NEGERI BATAM

Address of Main Location

Kampus Politeknik Negeri Batam JI. Ahmad Yani Batam Kota Batam 29461 Indonesia

Standard AuditedISO 9001:2015Date of Audit24 – 26 September 2019

Disclaimers and Notes

| Number | Disclaimer and Notes |
|--------|---|
| 1 | The report is confidential between the client and the URS Group of Companies and |
| | Regulators. Should a client and/or URS wish to circulate to other, non-named parties, then |
| | consent in writing should be obtained from the stated parties above. |
| 2 | The content of this report has been produced from samples taken during the visit. |
| 3 | If the client does NOT agree with the content of this report, the Client should notify URS within |
| | 7 working days of receipt of the report. |
| 4 | The audit has been performed in-line with the quotation and the scheme rules and regulations |
| | - refer to www.urs-holdings.com (Scheme Rules and Regulations) |
| 5 | Cancellation of a planned audit visit may incur a cost if not requested in writing and is less than |
| | 7 working days before the visit is scheduled - refer to www.urs-holdings.com |
| 6 | If significant changes are made to the management system, scope, location, number of sites or |
| | ownership, please notify URS in writing as soon as possible. |
| 7 | Please note that Audit Reports are independently reviewed within URS and in the unlikely |
| | event that the internal reviewer does not agree with the Auditor's recommendations and |
| | conclusion, URS shall notify you of the outcome. |
| 8 | During the independent review of this report, should the auditor be required to explain further |
| | his/her audit comments, the content of the audit report and supporting documents may be |
| | amended. Should any alteration materially affect the outcome of this report, you will be advised |
| | accordingly. |
| | |

| Client Signature (Optional) | Lead Auditor Signature (Optional) |
|-----------------------------|-----------------------------------|
| Mr. Uuf Brajawidagda | Mr. Fredon Simson Hutapea |



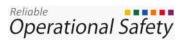
1.0 Administration of the Audit Activity and Changes

| AUDIT TEAM members | Total Hours on Audit | Total Days on Audit (nearest half day) | Shift(s) Audited | Name of Translator if Applicable | Name of Specialist if Applicable |
|---------------------------|-------------------------------|---|---------------------|-------------------------------------|-------------------------------------|
| Mr. Fredon Simson Hutapea | 20 hours | 2.5 MD | N/A | N/A | N/A |
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| CLIENT CONTACT(s) - Primary | Primary Contact(s) Changed |
|-----------------------------|----------------------------|
| Mr. Uuf Brajawidagda | N/A |

| CLIENT FINANCIAL Contact(s) - Currently | Financial Contact(s) Changed |
|---|------------------------------|
| Mr. Uuf Brajawidagda | N/A |

OTHER ADMINISTRATIVE CHANGES that may be Relevant for the Client Record No changes.





2.0 Technical Aspects of the Audit and Changes

This section of the Report seeks to identify significant technical or business changes to the Client, that may effect the certification scope, the manner in which the audit was conducted, or is to be conducted for the future, which may effect the audit duration.

2.0.1 The Client's Fundamental Processes:

The auditor is ONLY defining the Client's Fundamental Processes or Departments that the client refers to in their management system (i.e.: functions in the standard such as Management Review, is a Management Process and is recorded else where). The auditor may further clarify a Client's fundamental process name to aid programme activities e.g.: if reference is made to Manufacture in a general engineering company, the auditor may expand its reference by stating Manufacture - cutting, Manufacture - Painting. The auditor is responsible for "building" the fundamental processes for the 3 year certification programme; as well as showing which fundamental processes have been seen in the individual audit plan for this visit.

| Name of the Fundamental Process or Department | Fundamental Process or Department CHANGED since last Visit |
|--|--|--|--|--|
| Curriculum Design | N/A | N/A | N/A | N/A |
| Teaching | | | | |
| Teaching Evaluation | | | | |
| Workshop/Lab | | | | |
| | | | | |





2.0.2 The Client's Business Structure - Locations and Shifts

| Client Certification Structure | Change in Address(es)of Certification Structure | Address CHANGES | Changes in Work Pattern (e.g.: Shifts) | Shift CHANGES |
|--------------------------------------|--|-----------------|--|---------------|
| Single | No | N/A | No | N/A |
| | | | | |

2.0.3 The Client's Scope

| Scope of Certification (refer to relevant Certificate) | Scope of Certification - minor CHANGES required |
|--|---|
| Management of Higher Education | No Changes |

3.0 Significant Changes

Significant changes that have been identified by the auditor during planning activities, or during the audit itself, or notified by the client to the auditor, are changes that require additional time to audit. As such, the auditor should perform a Special Visit to verify compliance of the changes.

| Area of Significant Change | Applicability | Brief Description of Change | Estimated Duration of Special Visit |
|--|---------------|-----------------------------|--|
| NEW Location (to be added to Certification) | No | | |
| A major increase in Employee numbers (greater than 45% from last visit) | No | | |
| Major change in the volume of Sales and/or Customers (e.g.: over 40% increase since last visit) | No | | |
| Major Change in applied technology/equipment/processes (e.g.: hand solder to automatic placement of components) | No | | |
| Major change in Regulation and/or customer requirements | No | | |
| Major change in scope (e.g.: Adding Design, Installation, extended products or services offered) | No | | |





4.0 Audit Team Summary, Recommendations and Conclusion

4.0.1 Audit Team Summary

Scope accordance with organization's activities : "Management of Higher Education".

All staff and employee, demonstrate the knowledge related to Quality Management System. Site Tours, Interview, Observation and Desk Audit had been conducted for ensuring the effectiveness of Quality Management System.

There is no NC (Major) and 1 (one) discrepancies (NC Minor) has found during audit. Several comments have been issued during audit for organization improvement.

We recommend for registration status of ISO 9001:2015 Certification to Politeknik Negeri Batam upon submission this client request.

4.0.2 Recommendation and Conclusion from the Normal Scheduled Visit

| Recommendation | Indicate Where Applicable |
|---|------------------------------|
| No action required | |
| Consider the Comment(s) Raised for the Next Visit | \boxtimes |
| Send in a Corrective Action Plan and EVIDENCE to close the Concern(s) - Ds (evidence should be sent within 60 working days) | |
| As a Major NC(s) has been raised this visit, a Special Visit will be required to verify closure of the NC(s) - the visit must be performed within 90 days | |
| The date of the special visit has been booked for | |

| Conclusion | Indicate Next Action |
|---|-------------------------|
| Grant Certification or Continued Certification | |
| Grant Certification or Continued Certification - Subject to the Client forwarding the | \boxtimes |
| information requested above | |
| Suspension and Special Visit Required | |
| Immediate withdrawal of Certification | |

4.0.3 Audit Team Recommendation from Acknowledged Significant Changes

The recommendation below is based upon the information stated in the Table under section 3.0 of this report (Significant Changes). The URS Office will review the recommendation below and confirm, or otherwise the requirement.



| Special Recommendation | Duration of Special Visit (to the nearest 0.5 day) | Proposed Date |
|---|--|------------------|
| A special visit to verify compliance of the management system with respect to the significant changes noted is required; which may amend the formally issued Certificate of Registration. The special visit should be conducted no later than 90 days from this visit date. | N/A | N/A |





5.0 Concerns Raised

Non-Compliance (NC)= major break-down in a process that may directly effect the final product or service being delivered, regulatory failure; or danger to life, or lack of compliance to a clause of the standard. Discrepancy (D) = a partial break-down in a process that does not directly cause a failure to the Product or Service being delivered, partial regulatory failure; possible minor injury, or partial non-compliance to a clause of the standard.

| Number | Wording of Requirement | Wording of NC or D (include Client Document Reference) | Evidence for NC or D | Clause Ref. | Classification | Justification of D |
|--------|--|--|----------------------|----------------|----------------|--------------------|
| 1 | The organization shall plan How to Integrate and implement the actions into its quality management system processes and Evaluate the effectiveness of these actions. | Risk assessment activities needs to be improves in terms of [clause 6.1] : - Seen any risk mitigation and evaluation had not documented yet as objective evidence for Y2019 for ensuring process effectiveness. (e.g. Program Study, SBUM, SBAK, etc.); - seen several identified risk and determined control needs to be evaluated in terms of control variabel of Dept. (e.g. Program Study, SBUM, SBAK, etc.); - Seen any documented procedure used in related to method for risk | See wording of D | 6.1 | D | See wording of D |





| Number | Wording of Requirement | Wording of NC or D (include Client Document Reference) | Evidence for NC or D | Clause Ref. | Classification | Justification of D |
|--------|------------------------|--|----------------------|----------------|----------------|--------------------|
| | | evaluation and risk mitigation had no clear; | | | | |
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6.0 Comments Raised

OFI = Opportunity for Improvement - An area noted in a process that the auditor is aware that potential improvement can be made within the said process. PNC = Potential Non-Compliance - An area where the auditor has not fully audited the process (e.g.: a new change has been introduced to a process) but is aware that the process is not fully compliant.

| Reliable | |
|-------------|--------|
| Operational | Safety |



| Number | Description of Comment | Comment Type | | |
|--------|---|-----------------|--|--|
| 1 | Seen quality objective had been maintained and controlled by each Dept.; howvever it can be lead to any potential problem if it had not established yet by considering relevant function of process and risk assessment result (e.g. Program Study, SBUM, SBAK, etc.) [clause 6.2] | | | |
| 2 | Seen internal quality audit has been performed for Y2019, however it can be lead to any potential problmen if there is lack of recorded any objective evidences taken during audit process (e.g. Program Study, SBUM, SBAK, etc.) [clause 9.2] | | | |
| 3 | Seen new student selection had been maintained and controlled by SBAK Dept.; however it can be lead to any potential problem if any blind colour test had not conducted yet for several Program Study as monitoring control of process (e.g. informatika, mesin, perencanaan dan konstruksi kapal dan geomatika) [clause 8.1] | PNC | | |
| 4 | Seen process monitoring and evaluation for research had been maintained and controlled by P2M Dept.; however it can be lead to any potential problem if any evaluator competency had not evaluates yet for ensuring process effectiveness. (e.g. Research Title : Optimasi Sistem RFID (Transponder dan Reader) Teaching Factory Polibatam dan Aplikasinya sebagai Kunci Pintu Otomatis Di Ruang Basement TFME; Perancangan Simulator Dan Sistem Kendali Non Linear \3dof twincopter – Quadcopter) [clause 7.2] | | | |
| 5 | Seen social responsibility program "Pengabdian Masyarakat" had been performed and maintained by P2M Dept, but it can be more beneficial to measure impact dan benefit post activity of "pengabdian masyarakat" for ensuring process effectiveness. (e.g. Program : Pengadaan Sumber Listrik Tenaga Surya Untuk Tempat Ibadah Desa Pasir Panjang) [clause 8.5] | PNC | | |
| 6 | Seen material requisition had been maintained and controlled by SBUM Dept.; but It can be more beneficial to evaluates stock out material as monitoring control of process. [clause 8.5] | | | |
| 7 | Seen news publication and media had been maintained and controlled by SBUM Dept.; however it can be lead to any potential problem if any verification and validation for several publication had not documented yet as monitoring control of process. (e.g. News date 24/09/2019 web site; News date 24/09/2019 Instagram Account; News date 19/09/2019 Youtube Chanel) [clause 8.5] | | | |
| 8 | Seen news publication and media had been maintained and controlled by SBUM Dept.; but it can be more beneficial to evaluates and verified social media account used as monitoring control of process. [clause 8.1] | | | |
| 9 | Seen maintenance activities had been maintained and controlled by PP Dept.; but It can be more beneficial to perform and evaluates | OFI | | |





| Number | Description of Comment | Comment Type |
|--------|--|-----------------|
| | analysis data as performance indicator process for Maintenance Dept. by considering data availability. (e.g. respon time, root cause analysis; down time, etc.) [clause 9.1] | |
| 10 | - Seen industrial partnership had been maintained and controlled by P2M Dept.; however it can be lead to any potential problem if any partnership assessment, verification and validation had not documented yet as monitoring control of process. (e.g. PT. Schenider Electric Batam; PT. Trust Academic Solution) [clause 8.5] | |
| | - Seen teaching evaluation had been maintained and controlled by each program study; but it can be more beneficial to evaluates effectiveness of teaching activities by considering each given competency of subject lesson. (e.g. Aplikasi Mikrocontroller – Mr. Rizki Pratama, Pemograman Berbasis Perangkat Keras – Mr. Hamdani Arif; Teknologi Bangunan BAru – Nidia Yuniarsih) [clause 9.1] | |



2019/18477/SU1 ISO 9001:2015



EOF

Operational Safety