

Master Data of Organisation			
Name of Organisation	KONGUADU EDUCATIONAL INSTITUTIONS KONGUNADU COLLEGE OF ENGINEERING AND TECHNOLOGY (KNCET) KONGUNADU POLYTECHNIC COLLEGE (KPC) KONGUNADU COLLEGE OF EDUCATION (KCE)		
Name of corporate group (in case of multi site organization only)	NA		
Street	Namakkal-Trichy Main Road, Tholurpatti Post, Thottiam Taluk,		
Postcode / Town / Country	Trichy (Dt) - 621215, Tamilnadu, India		
Contact	Dr.PSK. R.Periaswamy, Chairman ; Dr.V.Gopinath, HOD Agri. Engg		
E-Mail	chairman@kongunadu.org ; hodag@kongunadu.ac.in		
Phone	9790092837		
System documentation: (Revision / Issue)	QMSM Issue No: 1 Rev 02 Dt. 10.03.2021		
Shift operation	no shift operation		
Language	English / Tamil		
Peculiarities	None		
Multi Site Organisation			
Selection of sites to be audited by sampling procedure	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> n.a.
An adequate listing of all sites in the scope(s) including all valid and relevant information in each case is part of the audit file	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> n.a.	

Audit profile	
Contract ID (ZE):	2.5-10416 / 2021
Standards under contract / Audit type	ISO 9001 : 2015 Re-Certification audit <input type="checkbox"/> Transition audit
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Surveillance mode	Yearly surveillance
Audit team leader	Suresh Ramalingam – 4407336
E-Mail Audit team leader	r.suresh@tuvindia.co.in
Audit team	
Technical expert	
Trainee	
Observer	

Audited Standards	
ISO 9001 : 2015	Recertification Audit
Certificate ID (TP): 44 100 21393282 - 01 and 02	Valid until: 08.08.2024
Scope: KNCET : Imparting Education Leading to Graduate, Post Graduate and Ph.D. Degree in Engineering and Technology Courses. KPC : Imparting Education Leading to Diploma in Engineering Courses KCE : Imparting Education Leading to Degree in Bachelor of Education	
Industry / Sector (EA, TB, ...) Teaching / Education – EAC 37	
Non-applicability of chapters: NIL	
No. of considered persons: 115	No. of sites (incl. HQ): 3
Lead auditor: Suresh Ramalingam	Audit ID (ZA): 2.5-10416 / 2021
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Certificate ID (TP):	Valid until:
Scope:	
Industry / Sector (EA, TB, ...)	
Non-applicability of chapters:	
No. of considered persons:	No. of sites (incl. HQ):
Lead auditor:	Audit ID (ZA):

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Certificate ID (TP):	Valid until:
Scope:	
Industry / Sector (EA, TB, ...)	
Non-applicability of chapters	
No. of considered persons:	No. of sites (incl. HQ):
Lead auditor:	Audit ID (ZA):
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Certificate ID (TP):	Valid until:
Scope:	
Industry / Sector (EA, TB, ...)	
Non-applicability of chapters:	
No. of considered persons:	No. of sites (incl. HQ):
Lead auditor:	Audit ID (ZA):

Definition of unit for duration and time		
Applied unit	Days	One audit day covers 8 audit hours
Audit Details		
Sites	3 Nos – (KNCET, KPC & KCE) Namakkal-Trichy Main Road, Tholurpatti Post,Thottiam Taluk, Trichy (Dt) - 621215, Tamilnadu, India	
Audit date	08.07.2024 - 11.07.2024	
Audit duration	3,50 person Days on site (incl. remote locations as applicable) inclusive 0,00 person Days on site for audit stage 1 (separate report)	

Application of methods and tools in remote auditing			
Conducted as a remote audit	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Partly	<input type="checkbox"/> Total
Technologies used for the remote audit	<input type="checkbox"/> MS Teams	<input type="checkbox"/> Cisco WebEx	<input type="checkbox"/> Zoom
	<input type="checkbox"/> Other on request of client: In this case, client takes over the responsibility for any required activity in information security.		

Details about the remote audit (if applicable)

The audit was performed applying technology for information and communication (“remote”) at 0%.

Effectiveness and efficiency of the remote-part was ensured by

- experienced application of engaged technology;
- the consecutive processing of the single sessions with the individual units;
- the online interviews with different people from diverse units and various hierarchical levels;
- the separation of the audit team in individual online sessions;
- reviewing an adequate sample of documented processes and/or information;
- the discussion of appropriate charts, diagrams, slides or any other relevant information;
- the presentation and discussion of photos, videos and audios of issues, being prepared on detailed guidance and governance of the audit team.

Details about reviewed information or documents, interviewed persons, content of videos & photos etc. are recorded in the report or (handwritten) notes.

If the audit was performed partly remote, the corresponding sessions are identified unambiguously in the audit plan.

Distribution/Confidentiality/Rights of ownership/Limitations/Responsibilities

This report is sent to the certification body or bodies, the members of the audit team and the audit representative of the organisation. All documents (such as this report) regarding the certification procedure are treated confidentially by the audit team and the certification body. This audit report remains the property of the certification body.

An audit is a procedure based on the principle of random sampling and cannot cover each detail of the management system. Therefore nonconformities of weaknesses may still exist which were not expressly mentioned by the auditors in the final meeting or in the audit report.

The responsibility for continuous effective operation of the management system always rests solely with the audited and certified organisation.

Salvo clause:

The audit report will be left to the organisation at the end of the audit - subject to approval by the certification body. The independent veto process may cause modifications or additions. In these cases a modified revision will be sent to the audited organisation.

Annex/Enclosures

Annex/
corresponding audit documentation

- Questionnaire(s) / Checklist(s)
- Additional annexes, number

Audit results Table of Results

ISO 9001:2015		---		---		---	
Clause	Rslt.*	Clause	Rslt.*	Clause	Rslt.*	Clause	Rslt.*
4.1	1						
4.2	1						
4.3	1						
4.4	1						

5.1	1						
5.2	1						
5.3	1						
6.1	1						
6.2	1						
6.3	1						
7.1	2						
7.2	1						
7.3	1						
7.4	1						
7.5	1						
8.1	1						
8.2	1						
8.3	1						
8.4	1						
8.5	2						
8.6	1						
8.7	1						
9.1	1						
9.2	1						
9.3	1						
10.1	1						
10.2	1						
10.3	1						
Additional requirements in accordance to ISO 17021:2015							Rslt.*
<ul style="list-style-type: none"> ▪ internal audits and management review IQA was conducted on 27.04.24, 21.06.24, & 04.07.24 & MRM was conducted on 07.07.2024 							1
<ul style="list-style-type: none"> ▪ review of actions taken on nonconformities identified in previous audit. NC / CM not raised in previous audit. 							1
<ul style="list-style-type: none"> ▪ responsiveness to complaints 							1
<ul style="list-style-type: none"> ▪ effectiveness of the management system with regard to fulfilment of objectives 							1
<ul style="list-style-type: none"> ▪ progress of planned activities aimed at continual improvement 							1
<ul style="list-style-type: none"> ▪ the client's management system ability and its performance regarding meeting of applicable requirements 							2
<ul style="list-style-type: none"> ▪ operational control of the client's processes 							2
<ul style="list-style-type: none"> ▪ review of any changes including the management system documentation 							1
<ul style="list-style-type: none"> ▪ use of marks and/or any other reference to certification Verified usage of TUV DAKKS Logo in company letter head & found satisfactory. 							1
<small>Rslt.* (Result): 0 = not audited; 1 = fulfilled; 2 = basically fulfilled/ potential for improvement; 3 = not fulfilled/ nonconformity; - = not applicable/ excluded. Details: see section „Audit findings“</small>							

Mandatory elements from A00VA02

Temporary Sites

a) Are temporary sites (i.e. installation sites, project locations etc.) available?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b) If yes: which one are visited?	NA	

Objective evidences

In any regular audit the audit team shall see and review the following objective evidences. To confirm, the corresponding revision information is registered in column „Edition“ That can become applicable as well for some or all the listed objectives in special audits, e.g. for extensions or after transferring sites.
 At least in **initial/recertification or extension audits** (or when necessary) these objective evidences/documents are attached adequately to the audit file and uploaded into the release workflow. In any other audit it is accepted to record the revision information only.

Title/Content	Edition	Attached
Entry in professional or commercial register (or comparable evidence) - if applicable		<input checked="" type="checkbox"/>
Organization chart/evidence of organization		<input checked="" type="checkbox"/>
Company policy for audited management systems		<input checked="" type="checkbox"/>
Overview of management system documentation (e.g. table of contents or presentation of the structure of the management system documentation, process map)		<input checked="" type="checkbox"/>
Result of management review (e.g. cover sheet or table of contents with date and signature)		<input checked="" type="checkbox"/>
Current annual planning of internal audits and evidence of audit report(s) (e.g.: cover sheet with date and signature)		<input checked="" type="checkbox"/>
Standard-specific evidence, as applicable (e.g. ISO 14001: extract of environmental permit register; ISO 27001: statement of applicability, ISO 45001: accident statistics; ISO 50001: energy report as cover sheet with date and signature or evidence of continual energy performance improvement)	NA	<input type="checkbox"/>

Confidential information in the attached evidences may be blacked.

Standard specific results

Additional standard specific audit results and/or information are recorded in corresponding „Supplemental audit reports“ (e.g. for ISO 27001 or ISO 50001).

Organisations profile

COMPANIES PROFILE CONTAINING FOLLOWING INFORMATION

- INFORMATION IF MULTI-SITE SCHEME IS APPLIED : YES

- IF YES, LIST OF AUDITED SITES (E.G. IN AUDIT PROGRAM) :
AND LIST OF CERTIFIED SITES BY THIS AUDIT AS ENCLOSURES
- 1) **KONGUNADU COLLEGE OF ENGINEERING AND TECHNOLOGY (KNCET)**
- 2) **KONGUNADU POLYTECHNIC COLLEGE (KPC)**
- 3) **KONGUNADU COLLEGE OF EDUCATION (KCE)**
- NUMBER OF EMPLOYEES (NUMBER OF EFFECTIVE EMPLOYEES) INCLUDING LOANED EMPLOYEES AND SUBCONTRACTORS (FULL TIME EQUIVALENTS) AS PER EACH LOCATION :
KNCET -- 70 employees with No shift Operation.
KPC – 35 employees with No shift operation
KPC – 10 employees with No shift operation
- RANGE OF PRODUCTS : BE/B Tech/ME/MTech/Ph.D / Diploma in Engg & Technology, B.Ed courses

CLIENTS / TOP CLIENTS / MAJOR CLIENTS : 10th/12th students, Graduates, Post Graduates

- IMPORTANT PROCESSES : Admission, Framing of Syllabus, Planning – Time table, Teaching, Exam, Results, Issue of Certificates, FDP, Library, Purchase, Maintenance
- IMPORTANT ENVIRONMENTAL ASPECTS (ISO 14001) : NA
- IMPORTANT OCCUPATIONAL HEALTH & SAFETY RISKS : NA
- CERTIFIED SINCE ? : 2021

Summary of Results

This audit was performed for the Certification audit in accordance to ISO 9001:2015. Recertification Audit was conducted on 08.07.2024, 09.07.2024, 10.07.2024 & 11.07.2024 for 3.50 man days. The additional requirements (e. g.: context of an organization, interested parties, risks and opportunities, planning of chances, organizational knowledge, life cycle perspective, outsourced processes, post-delivery activities) were assessed in this audit.

- No Non Conformances were found in the Audit. Based on the findings, it is ascertained that the Documented System, Processes & the Practices were meeting the requirements of ISO 9001: 2015 Standards.

Hence, Renewal of Certificate is recommended.

- **ASPECTS OF THE COMPANY AND/OR THE AUDIT TO BE HIGHLIGHTED**
- **ISO 9001 / ISO 14001 – STATEMENT ON THE IMPLEMENTATION OF THE STANDARD REQUIREMENTS**
 - **STRATEGICAL DIRECTION OF THE ORGANISATION (CONTEXT, STAKEHOLDER ANALYSIS) :**
DOCUMENTED IN CLAUSE 4.2 OF QMSM.
INTERNAL ISSUES : ABSENTISM, STUDENTS ENGLISH KNOWLEDGE IS POOR
EXTERNAL ISSUES : REMOTE LOCATION (RURAL AREA)
 - **RISK-BASED APPROACH (ANALYSIS OF RISKS AND OPPORTUNITIES) :**
DOCUMENTED IN RISK REGISTER AC-27 REV 01.
POOR INTAKE IN POLYTECHNIC COLLEGE – APPROACHED MANY SCHOOLS & PANCHAYAT PRESIDENTS IN NEARBY PLACES TO IMPROVE ADMISSION.

RURAL AREA – COMMUNICATION IN ENGLISH LANGUAGE IS POOR

CONTROL OF EXTERNALLY PROVIDED PROCESSES :

VERIFICATION BY INCOMING INSPECTION UPON RECEIPT OF MATERIAL. SUPPLIER PERFORMANCE RATING DONE FOR ALL RECEIPTS. SUPPLIER EVALUATION DONE BY PAST SUPPLIES, ISO 9001 CERTIFICATE, CUSTOMER APPROVED VENDOR, SITE AUDIT.

INCOMING MATERIAL INSPECTION LIKE LIBRARY BOOKS, MAINTENANCE SPARES, CARRIED OUT BY CORRELATION OF MATERIALS WITH PO & REVIEW OF MTCs, DIMENSION MEASUREMENT, VISUAL INSPECTION.

- **SYSTEMATICAL KNOWLEDGE MANAGEMENT :**

INTERNAL SOURCES: INTELLECTUAL PROPERTY, KNOWLEDGE GAINED FROM EXPERIENCE, LESSONS LEARNT FROM FAILURES AND SUCCESSFUL PROJECTS

EXTERNAL SOURCES: STANDARDS , GATHERING KNOWLEDGE FROM CUSTOMERS & EXTERNAL PROVIDERS. DOCUMENTED IN CLAUSE 7.1.6 OF QMSM. FULFILMENT OF

COMPLIANCE OBLIGATIONS : GST – 33AABTK2646K2ZL

- **LEGAL AND OTHER OBLIGATIONS : SATISFACTORY**

- ~~**CONSIDERING THE LIFE CYCLE PERSPECTIVE WHEN DETERMINING THE SIGNIFICANT ENVIRONMENTAL ASPECTS :**~~

- ~~**MEASUREMENT AND CONTINUAL IMPROVEMENT OF THE ENVIRONMENTAL PERFORMANCE :**~~

● ISO 45001 STATEMENT INDICATING THE IMPLEMENTATION OF THE STANDARD REQUIREMENTS :

~~**(PLEASE STRIKE OFF IF NOT APPLICABLE):**~~

- ~~**STRATEGICAL DIRECTION OF THE ORGANISATION (CONTEXT, UNDERSTANDING THE NEEDS AND EXPECTATIONS OF WORKERS AND OTHER INTERESTED PARTIES) :**~~

- ~~**CONSULTATION AND PARTICIPATION OF WORKERS :**~~

- ~~**HAZARD IDENTIFICATION AND ASSESSMENT OF RISKS AND OPPORTUNITIES :**~~

- ~~**PLANNING, ACTIONS TO ADDRESS RISKS AND OPPORTUNITIES :**~~

- ~~**MANAGEMENT OF CHANGE :**~~

- ~~**CONTRACTORS, OUTSOURCING :**~~

- ~~**CONTINUAL IMPROVEMENT OF OH&S PERFORMANCE :**~~

- ~~**CAPABILITY OF THE OH&SMS TO MEET ITS COMPLIANCE OBLIGATIONS :**~~

STATEMENT ON THE AUDIT PARTICIPATION DURING CLOSING MEETING (MANDATORY DETAILS TO BE FILLED AS BELOW) -

~~**1. THE MANAGEMENT LEGALLY RESPONSIBLE FOR OCCUPATIONAL HEALTH AND SAFETY :**~~

~~**2. PERSONNEL RESPONSIBLE FOR MONITORING EMPLOYEES' HEALTH :**~~

3. ~~THE EMPLOYEES' REPRESENTATIVE(S) WITH RESPONSIBILITY FOR OCCUPATIONAL HEALTH AND SAFETY; IF NECESSARY: DOCUMENTATION OF JUSTIFICATION IN CASE OF ABSENCE OF SINGLE AUDIT PARTICIPANTS DURING CLOSING MEETING~~ :

Conclusion

Taking into account the audit findings documented below, the organisation's size and structure, objectives, scope of the management system, processes and results achieved, the organisation has demonstrated that it operates its management system to ensure conformity with its own requirements, the requirements of interested parties, applicable legal requirements and appropriate requirements from the management system standards.

This includes in particular:the objective evidences,

- the policies and objectives and their implementation in the organisation,
- the processes existing in the management system and their interactions,
- the resource management,
- the measuring and analysis (incl. sample of indicators),
- the continual improvement process as well as
- the recording system (p.r.n. including standard specific objective evidences).

The implementation and the effectiveness of the management system and the processes for providing services/product realisation or to realize the objectives were assessed by the audit team by means of on-site inspection and examination of documented information on a random sample basis.

Audit findings		
Notes for the findings		
The evaluation of the audit findings basically follows the scheme shown below:		
Stage	Classification	Meaning
NC A	Major Nonconformity (Nonconformity A "major")	Nonconformities could be classified as major in the following circumstances: <ul style="list-style-type: none"> • if there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements, • a number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.
NC B	Minor Nonconformity (Nonconformity B "minor")	Nonconformities could be classified as minor, if these do not affect the capability of the management system to achieve the intended results.
OFI	Opportunity for improvement	Items which would allow optimisation of the management system in relation to the requirements of the relevant standard. It is recommended that the company implements these items.
GP	Positive aspects / Good Practice	Positive aspects of the management system worthy of special mention (see also point 4.3 if applicable).
CM	Comments	Special situation and information to be traced in next audit.

If applicable: Guidance for management of nonconformities

Identified nonconformities are each documented in a nonconformity report ("Management of a nonconformity"), which are part of this audit report as annexes.

The audit team uses the nonconformity reports after the audit to track the processing status and also documents in them the final assessment results for the nonconformities concerned.

The organization shall perform a root cause analysis for any nonconformity and define adequate corrective actions. Root cause analysis, corrective actions including action plan for implementation and - if applicable- objective evidences for performed corrections or containment actions shall be submitted electronically to nominated lead auditor in charge on time to agreed deadline (latest six weeks after last day of the audit). The lead auditor will review these documents and shall inform organisation about the result.

The auditee organisation shall implement the corrective actions as defined in the approved action plan and review the effectiveness of implemented actions.

In the case of major nonconformities (NC A) the lead auditor shall verify the complete and effective implementation of action plan until agreed date (latest three months after last day of the audit). On decision of the auditor depending on type and extent of identified nonconformity, this can be done in a follow up audit on site or in a desktop-review of submitted documentation (objective evidence).

For minor nonconformities (NC B) it can be agreed to perform the verification of effective implementation of action plan in the next regular audit.

If any nonconformity applies to more than one of the audited standards, it may be recorded in a common nonconformity report, but shall be counted in the audit report for each applicable standard. The number of nonconformity reports may therefore be less than the number of nonconformities.

Summary for nonconformities

Standard	Raised in this audit		To be verified from previous audit
	Number NC A	Number NC B	Number NC
ISO 9001:2015	0	0	0
---	0	0	0
---	0	0	0
---	0	0	0
Total	0	0	0
Total number of nonconformity-reports raised in this audit:			0
<input type="checkbox"/> At least one of the nonconformities is graded as „generic“ and is counted in more than one corresponding audited standard.			
<input type="checkbox"/> During this audit the implementation of corrective actions and effectiveness of nonconformities of previous audit was verified. The records are attached to this audit file.			

No	OFI (Opportunity for Improvement)	Area / Process	Standard: clause
1.	Recording of actions taken for pending purchase of books may be improved.	Purchase	ISO 9001:2015 8.4
2.	Process Flow Map for PhD course may be documented with course file contents.	Teaching	ISO 9001:2015 8.5.1

3.	Clarity on Period and Hours may be improved in KPC and accordingly Time table may be prepared.	Teaching	ISO 9001:2015 8.5.1
4.	Lab Manual for Practicals may be documented in KPC.	Teaching	ISO 9001:2015 8.5.1


No	GP (Good Practice)	Area / Process	Standard: clause
1.	Top Management commitment & Very Good Infrastructure	Top Management	ISO 9001:2015 5.1.1 / 7.1
2.	Customer Focus & Competent Personnel	Team / Human Resource	ISO 9001:2015 5.1.2 / 7.2
3.	Placement recorded 100%	Traning & Pacement	ISO 9001:2015 7.2
4.	Received Project funds from DSTSERB & MSME woth 1.25 Crores (KNCET)	Academic	ISO 9001:2015 8.1
5.	Best NSS Unit award from TNCE out of 650 colleges. (B.Ed)	Contunual Improvement	ISO 9001:2015 10.3
6.	Overall result in KPC was 90.42% and stood state 1st.	Results	ISO 9001:2015 8.6


No	CM (Comment)	Area / Process	Standard: clause
1.			
2.			
3.			

Closure and recommendations				
Closure result	ISO 9001:2015	---	---	---
Fulfilled	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open nonconformities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not fulfilled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendations of audit team	ISO 9001:2015	---	---	---
Grant*/Extension*/Renewing*	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintenance*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suspension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Withdrawal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

***) Grant / Extension / Renewing / Maintenance in the case of open nonconformities assumes that the nonconformities will be cleared as agreed**
Explanation of the terms:
 Renewing: New issue of the certificate for the re-certification.
 Restoring: End of the temporary invalidity of certificate after the suspension or after delayed re-certification.

Comments for next audit
<p>If applicable, the final evidence of effectiveness and implementation of corrections and corrective actions for the nonconformities from this audit will be verified in the next audit.</p> <p>The comments and opportunities for improvement will be taken up again.</p> <p>The next audit is preliminarily scheduled for: Date On of before 11.07.2025</p>

Responsible for content	
Name: Suresh Ramalingam	Date: 11.07.2024
 Signature audit team leader	


PRINCIPAL
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 Engineering and Technology,
 Tholurpatti (Po), Thottiam (Tk),
 Trichy (Dt). Pin : 621 215.