Audit Report

Organisation	**FAKULTAS TEKNIK UNIVERSITAS NEGERI SURABAYA**
Audits (ZA):	

TÜV NORD
PT. TÜV NORD Indonesia

Master Data of Organisation		
Name of Organisation	**FAKULTAS TEKNIK UNIVERSITAS NEGERI SURABAYA**	
Name of corporate group (in case of group certification)	N/A	
Street	Gedung E1-Kampus Ketintang Jl. Ketintang Surabaya 60231 - Indonesia	
Postcode / Town / Country	60231 / Surabaya / Indonesia	
Contact	Mr. Prof. Dr. Munoto, M.Pd	
E-Mail	munoto@unesa.ac.id	
Phone/Fax	031 – 8280009	031 – 8280009, 8280796
Language	Indonesian	
Scope Description	Penyelenggaraan Proses Akademik, Administrasi dan Pelayanan Akademik beserta Proses Pendukung Lainnya pada Fakultas Teknik, Universitas Negeri Surabaya ☐ more description regarding scope in annex	
Industry / Scope (EA, TA, ...)	37	

Audit profile		
Standards under contract / Audit type	ISO 9001 : 2015 Surveillance Audit (SA-1)	
System documentation: Revision / Issue	RL/FT-UNESA Rev.00 / 18 Sep 2017	
Surveillance mode	Yearly surveillance	
Audit team leader / responsible	Poernomo Amiprodjo (PA)	15 16 037
Audit team		
Technical expert - Trainee		
Multisite-organisation	All sites are listed in: ☐ Questionnaire ☐ separate Listing	
Shift operation	no shift operation	

Audited Standards		
ISO 9001 : 2015		
Exclusions:	NA	
Audit team leader:	Poernomo Amiprodjo	Audit number(ZA):
Certificate number:	16 00 E 12046	Valid until: 06-09-2021
ISO 14001 : 2015		
Exclusions:		

Audit Report

Organisation	**FAKULTAS TEKNIK UNIVERSITAS NEGERI SURABAYA**
Audits (ZA):	

TÜV NORD

PT. TÜV NORD Indonesia

Audit team leader:	Audit number(ZA):
Certificate number:	Valid until:
OHSAS 18001 : 2007	
Exclusions:	
Audit team leader:	Audit number(ZA):
Certificate number:	Valid until:
ISO 37001 : 2016	
Exclusions:	
Audit team leader:	Audit number(ZA):
Certificate number:	Valid until:

Audit-Details

Sites	Gedung E1-Kampus Ketintang Surabaya 60231 - Indonesia
Audit date	16~17.10.2019
Audit duration	2 mandays on site including

Details for Stage 1 - Audit

Stage 1 - Audit	not necessary.	
Duration Stage 1 - Audit	ISO 9001 : 2015 ISO 14001 : 2015 ISO 37001 : 2016 :	0,00 person-day (s) 0,00 person-day (s) 0,00 person-day (s) 0,00 person-day (s) 0,00 total
Date Stage 1 - Audit	-	

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 release 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	☒ Questionaire(s) / Checklist(s) ☒ Additional annexes, number

Summary of results

ISO 9001:2015			ISO 14001:2015			OHSAS 18001 : 2007			ISO 37001:2016					
Clause	Audited	Result*	Clause	Audited	Result*	Clause	Audited	Result*	Clause	Audited	Result*			
4.1	☒	1	4.1	☐		4.1	☐		4.1	☐				
4.2	☒	1	4.2	☐		4.2	☐		4.2	☐				
4.3	☒	1	4.3	☐		4.3	☐		4.3	☐				
4.4	☒	1	4.4	☐		4.3.1	☐		4.4	☐				
5.1	☒	1	5.1	☐		4.3.2	☐		4.5	☐				
5.2	☒	1	5.2	☐		4.3.3	☐		5.1	☐				
5.3	☒	1	5.3	☐		4.4	☐		5.2	☐				
6.1	☒	1	6.1	☐		4.4.1	☐		5.3	☐				
6.2	☒	1	6.2	☐		4.4.2	☐		6.1	☐				
6.3	☒	1	7.1	☐		4.4.3	☐		6.2	☐				
7.1	☒	1	7.2	☐		4.4.4	☐		7.1	☐				
7.2	☒	2	7.3	☐		4.4.5	☐		7.2	☐				
7.3	☒	1	7.4	☐		4.4.6	☐		7.3	☐				
7.4	☒	1	7.5	☐		4.4.7	☐		7.4	☐				
7.5	☒	1	8.1	☐		4.5	☐		7.5	☐				
8.1	☒	1	8.2	☐		4.5.1	☐		8.1	☐				
8.2	☒	1	9.1	☐		4.5.2	☐		8.2	☐				
8.3	☒	1	9.2	☐		4.5.3	☐		8.3	☐				
8.4	☒	2	9.3	☐		4.5.4	☐		8.4	☐				
8.5	☒	1	10.1	☐		4.5.5	☐		8.5	☐				
8.6	☒	1	10.2	☐		4.6	☐		8.6	☐				
8.7	☒	1							8.7	☐				
9.1	☒	2							8.8	☐				
9.2	☒	2							8.9	☐				
9.3	☒	1							8.10	☐				
10.1	☒	1							9.1	☐				
10.2	☒	1							9.2	☐				
10.3	☒	1							9.3	☐				
									9.4	☐				
									10.1	☐				
									10.2	☐				

Obligatry elements from ISO17021-1 :2015	Audited	Result
a) internal audits and management review;	☒	1
b) review of actions taken on nonconformities identified in previous audit;	☒	1
c) treatment of complaints;	☒	1
d) effectiveness of the system to achieve the certified client's objectives;	☒	1
e) progress of planned activities aimed at continual improvement;	☒	1
f) continuing operational control;	☒	1
g) review of any changes including system documentation	☒	1
h) use of marks and/or any other reference to certification.	☒	1

audited: ☒= audited sections of the standard;

Result: 1 = fulfilled; 2 = basically fulfilled / potential for improvement; 3 = not fulfilled / nonconformity ; - = not applicable / excluded.
Details are listed in the section "Detailed results". Fields with a coloured background are obligatory elements in **every** audit.

Obligatory elements

a) Are temporary sites (i.e installation sites, project locations etc.) available?	yes ☒	no ☐
b) Which one are visited?	Peningkatan Jalan Dalam Kota Rengat	

Organisations profile

1. Company information:

Berdasarkan SK Menteri P dan K No. 0124/U/1979 dan diterbitkannya Peraturan Pemerintah (PP) RI No. 27 Tahun 1981, FKIT berubah menjadi Fakultas Pendidikan Teknologi dan Kejuruan (FPTK), dengan empat jurusan yaitu (1) Pendidikan Teknik Elektro (PTE), (2) Pendidikan Teknik Mesin (PTM), (3) Pendidikan Teknik Bangunan (PTB) dan Pendidikan Kesejahteraan Keluarga (PKK). Kemudian terbit SK Menteri P dan K No. 0211/U/1982, menatapkan mulai tahun akademik 1982/1983 Jurusan dan Program Studi di FPTK IKIP Surabaya terdiri dari empat jurusan, yaitu

1. Pendidikan Teknik Elektro terdiri dari dua program studi yaitu Teknik Tenaga Listrik dan Teknik Elektronika Komunikasi
2. Pendidikan Teknik Mesin terdiri dari dua program studi yaitu Teknik Mesin Produksi dan Teknik Mesin Otomotif
3. Pendidikan Teknik Bangunan terdiri dari dua program studi yaitu Teknik Bangunan Gedung dan Teknik Bangunan Air.
4. Pendidikan Kesejahteraan Keluarga terdiri dari dua program studi yaitu Tata Boga dan Tata Busana.

Dalam Rangka turut mencerdaskan masyarakat dan bangsa Indonesia, Fakultas Teknik sebagai bagian dari Universitas Negeri Surabaya (Unesa) memiliki fungsi dan tanggung jawab yang dituangkan pada visi dan misi untuk menjadi lembaga pendidikan yang unggul khususnya dalam bidang teknologi dan pendidikan kejuruan. Untuk mewujudkan visi dan misi Fakultas Teknik Universitas Negeri Surabaya saat ini mengelola Program Sarjana Strata-1 Kependidikan dan NonKependidikan serta Profesional Diploma-3 yang tersebar dalam 5 jurusan Meliputi :

1. Jurusan Teknik Elektro
   Jurusan Teknik Elektro memiliki beberapa program studi meliputi :
   1. Program Studi S-1 Pendidikan Teknik Elektro
   2. Program Studi S-1 Teknik Elektro
   3. Program Studi D-3 Teknik Listrik
2. Jurusan Teknik Mesin
   Jurusan Teknik Mesin memiliki beberapa program studi meliputi :
   1. Program Studi S-1 Pendidikan Teknik Mesin
   2. Program Studi S-1 Teknik Mesin
   3. Program Studi D-3 Teknik Mesin
3. Jurusan Teknik Sipil
   Jurusan Teknik Sipil memiliki beberapa program studi meliputi :
   1. Program Studi S-1 Pendidikan Teknik Bangunan
   2. Program Studi S-1 Teknik Sipil
   3. Program Studi D-3 Teknik Sipil
   4. Program Studi D-3 Transportasi
4. Jurusan Pendidikan Kesejahteraan Keluarga
   Jurusan Pendidikan Kesejahteraan Keluarga memiliki beberapa program studi meliputi :
   1. Program Studi S-1 Pendidikan Tata Boga
   2. Program Studi S-1 Pendidikan Tata Rias
   3. Program Studi S-1 Gizi
   4. Program Studi D-3 Tata Boga
   5. Program Studi D-3 Tata Busana
5. Jurusan Teknik Informatika
   Jurusan Teknik Informatika memiliki beberapa program studi meliputi :
   1. Program Studi S-1 Pendidikan Teknologi Informasi
   2. Program Studi S-1 Teknik Informatika
   3. Program Studi S-1 Sistem Informasi
   4. Program Studi D-3 Manajemen Informatika

VISI

Unggul dalam teknologi dan pendidikan kejuruan (*excellent in technology and vocational education*)

MISI

1. Menyelenggarakan pendidikan berkualitas yang relevan dengan kebutuhan pasar kerja global dan perkembangan iptek yang mengacu kepada Standar Nasional Pendidikan Tinggi.
2. Meningkatkan kualitas pendidik dan tenaga kependidikan, kualitas sarana dan prasarana untuk mendukung peningkatan kualitas proses pembelajaran secara berkesinambungan.
3. Mengembangkan riset dalam bidang teknologi dan pendidikan kejuruan yang dilandasi profesionalisme untuk diterapkan dalam rangka pengabdian kepada masyarakat dan dunia pendidikan.
4. Membangun institusi yang sehat, efisien, efektif, produktif, transparan, akuntabel, sejahtera, dan berkeadilan.
5. Mengembangkan jalinan kerjasama dengan lembaga nasional dan internasional terkait secara berkelanjutan.
6. Menghasilkan tenaga kependidikan dan non kependidikan yang kompeten, profesional, religius, kreatif, mandiri, dan berjiwa pemimpin serta berkemampuan kewirausahaan.

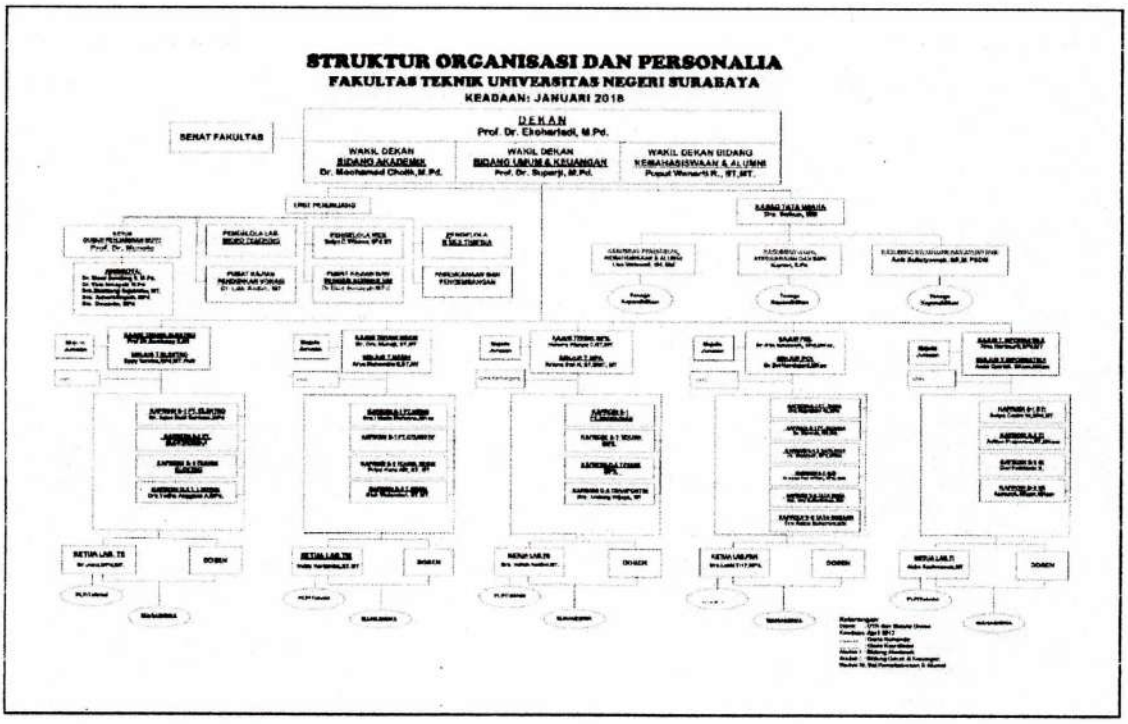
Tujuan

1. Menyiapkan peserta didik menjadi anggota masyarakat yang memiliki kemampuan akademik dan/atau profesional yang dapat menerapkan, mengembangkan, memperkaya khasanah ilmu pengetahuan dan teknologi;
2. Mengembangkan dan menyebarluaskan ilmu pengetahuan dan teknologi serta mengupayakan penggunaannya untuk meningkatkan taraf kehidupan masyarakat dan memperkaya kebudayaan nasional;
3. Mendukung pembangunan masyarakat madani (civil society) yang demokratis dengan berperan sebagai kekuatan moral yang mandiri;
4. Mencapai keunggulan kompetitif dan komparatif melalui penerapan prinsip pengelolaan sumber daya sesuai dengan asas pengelolaan yang profesional.

Pimpinan Fakultas Teknik saat ini adalah sebagai berikut :

Dekan	: Dr. Maspiyah, M. Kes.
Wakil Dekan 1	: Drs. Edy Sulistyo, M.Pd.
Wakil Dekan 2	: Dr. Agus Wiyono, S.Pd.
Wakil Dekan 3	: Deddy Rahman Prehanto, S.Kom., M. Kom.

Dalam kerangka pelaksaan sistem manajemen mutu ISO 9001:2015 di Fakultas Teknik, pimpinan fakultas (dekan) yaitu Dr. Maspiyah, M. Kes. berlaku sebagai pimpinan puncak yang memiliki tugas dan kewenangan pengendalian pelaksanaan sistem manajemen mutu. dalam pelaksanaannya, beliau di bantu oleh Gugus Penjaminan Mutu (GPM) yang di ketuai oleh Prof. Dr. Munoto, M.Pd yang memastikan jalannya sistem manajamen mutu di tingkat Fakultas. Untuk tingkat jurusan, GPM dibantu oleh Unit Penjaminan Mutu (UPM).



Untuk membantu proses belajar-mengajar mahasiswa Fakultas Teknik Universitas Negeri Surabaya memiliki berbagai macam laboratorium. Laboratorium yang ada di Fakultas Teknik Universitas Negeri Surabaya Meliputi :

1. Jurusan Teknik Elektro
   - Laboratorium Konversi
   - Laboratorium Elektronika
   - Laboratorium Instalasi Listrik
   - Laboratorium Mikroprosesor
   - Laboratorium Transmisi dan Distribusi
   - Laboratorium Pendingin dan Tata Udara
   - Laboratorium Robotika
   - Laboratorium Telekomunikasi
   - Laboratorium Fisika Teknik
   - Laboratorium Internetworking
   - Laboratorium Komputer
   - Laboratorium Pengukuran
   - Laboratorium Hypermedia
   - Laboratorium Tegangan Tinggi
   - Laboratorium Bengkel Listrik
2. Jurusan Teknik Mesin
   - Laboratorium Kelistrikan Otomotif
   - Laboratorium Chasis
   - Laboratorium Motor Diesel
   - Laboratorium Pengelasan
   - Laboratorium Permesinan
   - Laboratorium CNC
   - Laboratorium Fabrikasi
   - Laboratorium Mekatronika
   - Laboratorium Pelumas dan Bahan Bakar
   - Laboratorium Pengujian Mesin / Bahan
   - Laboratorium Pengecatan
   - Laboratorium CSD / CAE / Komputer

- Laboratorium Sepeda Motor & Motor Kecil
- Laboratorium Motor Bensin
- Laboratorium AC Mobil
- Laboratorium Pengujian Performa Mesin
- Laboratorium Mekanika Fluida
- Laboratorium Pelapisan Logam
- Laboratorium Perpindahan Panas
- Laboratorium Aerodinamika

3. Jurusan Teknik Sipil
   - Laboratorium Konstruksi & Uji Bahan
   - Laboratorium Mekanika Tanah
   - Laboratorium Bengkel Kayu
   - Laboratorium Bengkel Batu
   - Laboratorium Transportasi
   - Laboratorium Plambing
   - Laboratorium Keairan
   - Laboratorium Beton
   - Laboratorium Studio Gambar
   - Laboratorium CAD / CAE / Komputer
4. Jurusan Pendidikan Kesejahteraan Keluarga (PKK)
   - Laboratorium Pengelola Makanan
   - Laboratorium Tata Hidang
   - Laboratorium Bakery & Pastry
   - Laboratorium Chocolate & Sugar Con
   - Laboratorium Ilmu Pengetahuan Alam
   - Laboratorium Komputer & Multimedia
   - Laboratorium Usaha Boga / Cafetaria
   - Laboratorium Pengelolaan Usaha
   - Laboratorium Konstruksi Pola
   - Laboratorium Kriya Tekstil
   - Laboratorium Manajemen Busana
   - Laboratorium Drapping
   - Laboratorium Design
   - Laboratorium Bordir
   - Laboratorium Tata Rias Pengantin
   - Laboratorium Tata Rias Wajah
   - Laboratorium Perawatan Kulit Wajah
   - Laboratorium Perawatan Rambut
   - Laboratorium Spa
5. Jurusan Teknik Informatika
   - Laboratorium Rekayasa Perangkat Lunak
   - Laboratorium Multimedia Kreatif
   - Laboratorium Sistem Informasi
   - Laboratorium Jaringan Dasar
   - Laboratorium Network Operating Center (pusat operasi jaringan)

2. **Process description observed to find audit based on process approach**:
   The bussiness process of the company can be describe as below :

   Registration → Learning Process → Internship → Examination → Graduation

Audit Result

1. **The effectiveness of corrective action implemented from previous audit (CA-2):**

   There were 8 Potentials for Improvements (PI) from the previous audit. All nonconformances have been taken corrective action internally by related functions and its reports have been reviewed by management representative.

2. **Organization's issues, expectations of interested parties and risk identification:**

   Organization has identified clearly the internal and external issues, expectations of interested parties and risk identification. All are monitored and reviewed at periodical time on Management Review. The Internal / external issues and the interested parties are desribed on the context of organization. The risk identification for Quality Management System is described on documented information # " *Identifikasi Penilaian dan Penanganan Risiko / Peluang* ".

3. **Quality objectives, OHSAS objectives, and degree of implementation; Monitoring the objective achievement:**

   Quality objectives have been defined since January 2018 and identified as well as implemented on each department referring to business process. Quality objective is monitored monthly and reviewed on Management Review Meeting.

4. **Conformity with product requirements / legal and other requirements:**

   The organization has identified and adopted applicable legal regulation and applicable other requirements as assessed, and the information of identified legal and other requirements including their compliance were gained during the audit such as :

Legal Requirement, Regulation etc.	Violation / Complaint?
Undang-Undang Republik Indonesia No. 14 tahun 2005 tentang Guru dan Dosen	Comply
Undang-Undang Republik Indonesia No. 12 tahun 2012 tentang Pendidikan Tinggi	Comply
Peraturan Pemerintah RI No. 4 tentang Penyelenggaraan Pendidikan Tinggi dan Pengelolaan Perguruan Tinggi	Comply
UU No. 8 tahun 1974 jo. Undang-Undang No. 43 tahun 1999 tentang Pokok-pokok Kepegawaian	Comply
UU No. 20 tahun 2003 tentang Sistem pendidikan Nasional	Comply
PP No. 19 tahun 2005 tentang Standar Nasional Pendidikan	Comply
UU No. 12 tahun 2012 tentang Pendidikan Tinggi	Comply
Permendikbud No. 50 tahun 2014 Tentang Sistem penjaminan mutu Pendidikan Tinggi	Comply
SK Mendikbud No. 092/0/2001 tentang statuta Unesa	Comply
Permendikbud No. 49 tahun 2014 tentang KKNI	Comply
Permen No. 44 tahun 2015 tentang Standar Nasional pendidikan Tinggi	Comply

5. **Customer Satisfaction information:**

   Company have method to take customer fedback by giving questioners to students and lecturers. Last survey was conducted in September 2019. Records of customer satisfaction survey are on "Survey Kepuasan Pelanggan. Criteria to be survey include such as Infrastructure, Learning Process, Administration Services. The result of Customer Satisfaction index from the students (73,14) and lecturers (75,5) is " Satisfied ".

6. External complaint related business operation following ~~environmental concerned~~, product quality concerned, ~~OHSAS concerned~~:

There was no significant complaint from soorounding community, public, government or other external institution. External complaint will be recorded, since the verbal external complaints has been solved immediately. Company has method to handle the external complaint.

7. Continual improvement action and plan by the organization based on analysis of data, corrective and preventive action, and customer/external complaint:

The organization is continually improve the effectiveness of its Management System based on the internal audit results, monitoring and measurement of product , customer feedback as well as achievement of company objectives & target. The continual improvement is performed by changes the company objectives, program & target, revision of the procedures and provision of resources.

8. Internal audit

To evaluate the compliance and effectiveness of Management System implementation, Internal Audit program was scheduled once a year. The last audit has been conducted on **29~30 April 2019**. Management Representatives is responsible for planning and monitoring the conducting of internal audits. During internal audit auditors did not issue either Nonconformity or Observation. The status of corrective and preventive action are close. The procedure of internal audit is documented in the procedure and manual. The auditor team oncludes that the frequency of the internal audit and the capability of internal auditor are sufficient.

9. Management Review:

The review of management system within the organization has been attended by top management and department heads minimally once a year. The management review was performed on **05.08.2019**. Minutes of meeting was recorded in "Risalah Rapat Manajemen Review" . Attendance list of management review meeting were documented by document control.

Summary / explanations of results

The practical implementation of the standard(s) was evaluated and compared with the organization management system manual and supporting documents. The audit was conducted through discussions and interviews with personnel at various locations and functions throughout the facility.

The audit covered relevant processes / areas of the organisation in order to obtain an overall picture of the degree of management system implementation. Although performed to reasonable depth, not every detail of the complete management system could be checked.

The processes and their associated areas of organisation were checked in accordance with the pre-agreed schedule. Particular questions were used in support of the audit plan.

Conclusion

Taking into account the size and structure of the organisation, the products/services supplied and the process used, the organisation has basically demonstrated that it operatesand develops its management system effectively in order to ensure fulfilment of its own requirements, the requirements of its customers and the relevant legal requirements.

This includes in particular:

- The policies from **10.01.2018**, objectives and their implementation in the organisation
- The processes which exist in the management system and their interaction
- The management system documentation
- The recording system
- The resource management
- The measuring and analysis (management review from 05.**08.2019**, audit planning from **29.04.2019**, audit report(s) from **30.04.2019** and examples for indicators)
- The continual improvement process

also the implementation and the effectiveness of the management system and the processes for providing services/production/product realisation were assessed by the audit team by means of on-site inspection and examination of documents on a random sample basis.

Nonconformities, observations and the potential for improvement are described in the "Detailed Results" section.

Detailed results

The evaluation of the audit results basically follows the scheme shown below:

Stage	Classification	Meaning
NC A	Nonconformity A	1. Non-fulfillment of one or several requirements of the management system standard or 2. A situation which gives rise to considerable doubt as to the capability of the customer's management system to achieve the desired results
NC B	Nonconformity B	All other nonconformities
PI	Potential 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

Follow-up action(*): Action plan with follow-up Audit or action plan with documents or action plan (review of effectiveness in the next audit)

No.	NC A	Area / Process	Standard:clause	Follow-up action *	Set date
	NIL				

No.	NC B	Area / Process	Standard:clause	Follow-up action *	Set date
	NIL				

No.	PI	Area / Process	Standard: clause
1.	*Kompetensi Internal Auditor agar diupgrade dengan teknik audit berdasarkan ISO 19011:2018 - Guidelines for Auditing Management System.*	*MR*	*Q. 7.2*
2.	*Agenda Rapat Tinjauan Manajemen agar dilengkapi dengan pembahasan mengenai Kecukupan Sumber Daya yang meliputi sumber daya manusia, infrastruktur, peralatan / mesin, dll.*	*MR*	*Q. 9.3.2*
3.	*Tindak lanjut temuan Monitoring Pembelajaran Dosen agar terdokumentasi hasil tindakan perbaikannya.*	*Jurusan Sipil*	*Q 10.2*
4.	*Pernyataan Kesanggupan Mengajar agar secara konsisten dilakukan sebelum proses belajar mengajar.*	*Jurusan PKK*	*Q 8.1*
5.	*a. Usulan Tenaga Kependidikan (Tendik) sebanyak 12 orang yang diajukan ke universitas pada bulan September 2019 sebaiknya tersedia informasi terdokumentasinya.* *b. Kinerja pihak eksternal baik pemasok produk atau jasa agar dilakukan secara periodik.*	*TU*	*Q. 7.1.2* *Q.8.4*
6.	*Untuk keefektifan pencapaian proses belajar mengajar agar mempertimbangkan jumlah mahasiswa yang proporsional karena terdapat fakta bahwa kelas Mata Kuliah Pemrogaman Dasar pesertanya sebanyak 55 orang, sedang jumlah yang ditetapkan adalah 36-40 orang.*	*Lab Sistem Informasi*	*Q. 8.1*

No.	GP	Area / Process	Standard:clause
1.	*Pimpinan puncak dan seluruh staff FE-UNESA mempunyai komitmen yang tinggi dalam implementasi sistem manajemen mutu ISO 9001:2015*	*All*	*Q 5.1*
2.	*Organisasi sudah mengimplementasikan Sistem Online dalam mendukung kegiatan akademik dan kemahasiswaan, antara lain SIAKADU, E-JURNAL, SIPENA, E-OFFICE, SIMAS, SIMCV, dll*	*All*	*Q. 7.1.3*

No.	CM	Area / Process	Standard:clause

anagement of non-conformities

☒ Nonconformities were not found - the procedure can continue.

☐ Nonconformities were found.

In case of non-conformities:

☐ **Action Plan and Follow-up Audit:**

A scheduled plan of actions with the serial number of the findings, root cause analysis, corrections (to eliminate the non-conformity) and corrective actions (to eliminate the cause of the non-conformity) have to be submitted to the auditors for reviewing. Based upon the action plan the on-site review and evaluation of the introduction, implementation and effectiveness of implemented guided corrections and corrective actions take place.

or

☐ **Action Plan:**

A scheduled plan of actions with the serial number of the findings, root cause analysis, corrections (to eliminate the non-conformity) and corrective actions (to eliminate the cause of the non-conformity) have to be submitted to the auditors for reviewing.

Verification of effectiveness:

☐ **On a Follow-up Audit:**

☐ **By submission of documents:**

Evidence of the effectiveness of correction and corrective action is to explain to the deadline set by the Audit Team Leader submission of documents.

☐ **In the next audit:**

The final proof of the effectiveness of the corrections and corrective actions will be reviewed in the next regular audit.

Auditor in Charge:

The audit team leader directs the non-conformities as needed to the responsible auditor for processing.

Results

Results	ISO 9001:2015	ISO 14001:2015	OHSAS 18001:2007	--
Fulfilled	☒	☐	☐	☐
Open nonconformities	☐	☐	☐	☐
Not fulfilled	☐	☐	☐	☐
Follow up actions				
None	☒	☐	☐	☐
Action plan	☐	☐	☐	☐
Document review	☐	☐	☐	☐
Follow up audit	☐	☐	☐	☐
Next audit	☐	☐	☐	☐
Recommendations				
Grant/ **Renewal/** Extension*	☒	☐	☐	☐
Maintenance*	☐	☐	☐	☐
Suspension	☐	☐	☐	☐
Refuse / Withdrawal	☐	☐	☐	☐
	☐	☐	☐	☐

*) Grant **/ Renewal** / Extension **/ Maintenance** in the case of open nonconformities assumes that the nonconformities will be cleared as agreed

Comments for next audit

In the next audit the corrective actions, findings and opportunities for improvement will be discussed again.

For the next audit it is preliminarily agreed: before ***October 2019 (# SA 2)***

Signatures

Date: 17.10.2019 Name: Poernomo Amiprodjo	Signature Audit team leader
Date: 17.10.2019 Name: Mrs. Dr. Maspiyah, M. Kes.	Signature Representative of organisation

KEMENTERIAN RISET, TEKNOLOGI, DAN PENDIDIKAN TINGGI UNIVERSITAS NEGERI SURABAYA UNESA FAKULTAS TEKNIK