Certificate Renewal

Report for:

Vidya Prasarak Mandal's Dr. V.N. Bedekar Institute of Management Studies

LR reference:	MUM6021078 / 3463730
Assessment dates:	23-February-2021 - 24-February-2021
Reporting date:	02-March-2021
Client address:	Jnanadweepa' Chendani Bunder Road, Thane (W),400601,IN
Assessment criteria:	ISO 9001:2015
Assessment team:	Vinay Joglekar
LR Client Facing Office:	MUM India OU

![Lloyd's Register]

Contents   **Page**

Attachments:

MUM6021078_APP_QMS_CR_VVJ_M0.doc

This report was presented to and accepted by:

Name: Dr. Mahesh Bhanushali

Job title: Management Representative

01. Executive report

Assessment outcome:

Based on the assessment outcome the Assessment Team recommends the ISO 9001:2015 certification of Vidya Prasarak Mandal's Dr. V.N. Bedekar Institute of Management Studies for the agreed scope.

A 2 assessor-days of recertification audit was performed at Vidya Prasarak Mandal's Dr. V.N.Bedekar Institute of Management Studies as per plan on 23rd and 24th February 2021.

During this audit 2 Minor Non-conformance have been recorded. The management has proposed corrective actions for the same. Organization was generally found to be adhering to the process requirements and meeting the legal and statutory requirements. All the applicable clauses were verified through the documented management system of the organisation. The management has assured to take action to address areas for improvements and the organisation is recommended for the continuation of certification under ISO 9001:2015 criteria subject to technical review.

Scope:

"The provision of post graduate programs approved by the All India Council for Technical Education, leading to the award of Master of Management Studies (MMS) degrees by the University of Mumbai.

Changes:

This audit was recertification audit. Since the previous certification, the management has discontinued the provision of Post Graduate Diploma in Management (PGDM) and thus the scope has been now limited only to provision of Masters in Management Studies. This reduction in scope does not warrant any additional day for the audit.

Previous LRQA Findings

This audit was a recertification audit and there was one non-conformance observed from previous audit to be closed. The outcome of the root cause analysis as well as status of the corrective action was reviewed. It was observed that the action has been effective and hence the non-conformance has been closed.

Disclaimer

The assessment process relies on taking a sample of the activities of the business. This is not statistically based but uses representative examples. Not all of the detailed nature of a business may be sampled so, if no issues are raised in a particular process, it does not necessarily mean that there are no issues, and if issues are raised, it does not necessarily mean that these are the only issues.

The Assessment Team Leader confirms the contractual arrangements for ISO 9001:2015 are correct. This includes any changes required as a result of the outcome of the Stage 1 visit (including changes to the scope of assessment, duration of the Stage 2 visit, and duration of subsequent surveillance visits).

Continual improvement:

The institute has defined Vision, Mission and values for the institute. The quality policy and quality objectives also have been reviewed in alignment with the institute's ultimate goal. KPIs have been defined and continuous monitoring is being done. The institute is making progress in achieving its goals and new ventures are being planned to give a boost to further the growth. The institute has won many accolades and awards. Many of its faculty members also have achieved success in external seminars and one of the professors has been awarded

doctorate also in previous year.

Regular internal audits are being conducted and management review meetings are also conducted to review the progress on the key performance parameters.

Student satisfaction rating on faculty has always been very high.

Due to change in the regulatory environment, the PGDM courses are now discontinued and the no. of seats for MMS course have been increased from 120 to 180 numbers.

Areas for senior management attention:

Following are some of the key areas, which need management attention. However, for comprehensive and detail assessment findings, individual assessment reports may be referred.

Review the quality objectives to be in line with the 'customer's' requirements, and other measures for Vision statement

Review measure for attainment levels of course objectives, as required by the University guidelines

Review performance on quality objectives during internal audits and performance on quality objectives to be part of MR meeting agenda.

Assign responsibilities and timelines for the risk mitigating actions

The process of procurement to be more systematic.

Complaint management process may capture times of complaint recording and resolution etc and analysis may be carried out in IT as well as administration.

Training need assessment may be integrated with performance appraisal system for teaching staff as well in line with the competency level assessments. .

Review number of books pending to be returned beyond due date.

Use the private email ids of students for maintaining relationships after their separation with the institute, including follow up for books.

Study trend in the faculty performance levels to assess effectiveness of actions.

02. Assessment findings

Where scheme requirement differs to the standard definition below, the scheme definition will take preference

Major Nonconformity
The absence of, or the failure to implement and maintain, one or more management system elements, or a situation which would, on the basis of the available objective evidence, raise significant doubt of the management to achieve: The policy, objectives or public commitments of the organisation, compliance with the applicable regulatory requirements, conformance to applicable customer requirements, conformance with the audit criteria deliverables.

Minor Nonconformity
A finding indicative of a weakness in the implemented and maintained system, which has not significantly impacted on the capability of the management system or put at risk the system deliverables, but needs to be addressed to assure the future capability of the system.

Reference number	2558532_SBCVJZ01	**Assessment Criteria (Clause)**	ISO 9001:2015 (8.1)
Grade	Minor NC	**Issue Date**	25-February-2020
Status	Closed	**Process / Aspect**	MMS
Location(s)		Jnanadweepa' Chendani Bunder Road ,IN	
Statement of Non Conformity		The coverage of topics as per the session plan is a weak area.	
Requirement		Clause no. 8.1 Operational planning and control requires that the organization shall plan, implement and control the processes (see 4.4) needed to meet the requirements for the provision of products and services, and to implement the actions determined in Clause 6, by: a) determining the requirements for the products and services; b) establishing criteria for: 1) the processes; 2) the acceptance of products and services; d) implementing control of the processes in accordance with the criteria; e) determining, maintaining and retaining documented information to the extent necessary: 1) to have confidence that the processes have been carried out as planned; The output of this planning shall be suitable for the organization's operations.	
Evidence		It has been noted that, there was no evidence of any certification by the CR that the teaching learning plan (TLP) is complied fully. The controlling action of the reviews conducted by ADC also did not indicate that topics are getting covered as per plan. It was also noted that this was raised as an concern in one of the faculty review meetings. It was also noted that this issue also has been identified as one of the risks in the risk register and to hold regular review sessions was indicated as a mitigating action. If the topics are not covered as per plan, the students may be deprived of the inputs to make them successful in their career.	
Proposed correction, corrective action and timescales		The coverage of topics was reviewed and correction action was taken but was not recorded in the ADC review meetings. Also the topics were covered but not correctly described in the Certificate. The concerned persons like Faculty and CR will be appraised about the	

Proposed correction, corrective action and timescales	action to be taken and the correct status will be reported in minutes of next meeting due in March 2020. In long term, the methodology of listing topics also will be reviewed and improved if necessary with help of IT services. The root cause analysis of the issue will be carried and a corrective action will be taken by 31-03-2020
Correction	The topic concerned was actually covered. Only the content was not recorded and hence students were actually not deprived of the learning.
Root Cause analysis	ADC has verified all TLPs and execution documents. but contents were not clearly documented.
Corrective action	Format for recording compliance with the TLP, - Format no. (DR VNBRIMS/ REC/ACA/05) is amended to register actual date of conducting the session as well as actual topics covered in the session. This will be used to record the coverage of topics in ADC meetings regularly every month. ADC monthly meeting started from 04-03-2020. ADC Course Review MOM format created from 04-03-2020.
LR has reviewed and verified the implementation of actions taken.	**Date of closure** 23-February-2021

Reference number	3463730_SBCVJZ01	Assessment Criteria (Clause)	ISO 9001:2015 (6.2.1)
Grade	Minor NC	Issue Date	23-February-2021
Status	New	Process / Aspect	MMS
Location(s)		Jnanadweepa' Chendani Bunder Road ,IN	
Statement of Non Conformity		The measure for the course objectives of attaining higher levels in the MMS course is a weak area.	
Requirement		Clause no. 6.2.1 of the ISO 9001:2015 criteria requires that the organization shall establish quality objectives at relevant functions, levels and processes needed for the quality management system. The quality objectives shall: a) be consistent with the quality policy; b) be measurable; c) take into account applicable requirements; d) be relevant to conformity of products and services and to enhancement of customer satisfaction; e) be monitored; f) be communicated; g) be updated as appropriate. The organization shall maintain documented information on the quality objectives.	
Evidence		The organization shall maintain documented information on the quality objectives. It was observed that one of the measures for measuring attainment level 1, 2 and 3, was not as per the recommendation of the University of Mumbai, and this led to indicating the attainment level which was lower than the actual, thereby impacting the brand image of the institute adversely.	
Proposed correction, corrective action and timescales		Correction- The university guidelines for working out the attainment levels will be properly implemented for the subject of HR within next one month's time. Corrective action. - The format for working out the attainment levels will be amended with appropriate formulae so that the attainment levels will be carried out correctly henceforth. This will be carried out within next one month.	
Correction			
Root Cause analysis			
Corrective action			
LR has reviewed and verified the		Date of closure	

implementation of actions taken.

Reference number	3463730_SBCVJZ02	Assessment Criteria (Clause)	ISO 9001:2015 (7.1.3)
Grade	Minor NC	Issue Date	23-February-2021
Status	New	Process / Aspect	Library
Location(s)		Jnanadweepa' Chendani Bunder Road ,IN	
Statement of Non Conformity		The process of recovering books pending to be received from the students after the due date, is a weak area.	
Requirement		Clause no. 7.1.3 of the ISO 9001:2015 criteria, requires that, the organization shall determine, provide and maintain the infrastructure necessary for the operation of its processes and to achieve conformity of products and services. Infrastructure can include: a) buildings and associated utilities; b) equipment, including hardware and software; c) transportation resources; d) information and communication technology.	
Evidence		The management is not able to send more than one reminder as after the student separates from the institute, the e mail id provided the institute is discontinued. In absence of this control on the process of recovering the books, the management may be depriving the students from accessing a copy of the book when needed. The management may like to review the status of books pending to be received after due date, as a part of agenda in the Library committee review meeting.	
Proposed correction, corrective action and timescales		The efforts will be made to retrieve the book from Ms. Tejashri Murekar. within next one month's time. Corrective action - The status of pending books will be now reviewed regularly in the library committee meeting from next one month and appropriate actions will be initiated to recover the pending books.	
Correction			
Root Cause analysis			
Corrective action			
LR has reviewed and verified the implementation of actions taken.		Date of closure	

03. Assessment summary

Visit generic objective:

This was a Certificate Renewal visit, conducted against objectives previously notified to the client. The objectives of the next visit, including any applicable visit specific objective (theme / focus), are confirmed in the audit plan attached to this report.

Client attendees at the opening and closing meeting:

The attendees for the meetings included following members

Dr. Nitin Joshi, Director, Dr. Smita Jape, Associate Professor, Dr. Sreedharan Menon, Professor, Dr. Pallavi Chandwaskar, Assistant Professor, MMS Co-ordinator, Prof. Mahesh Bhanushali, MR, Assistant Professor, Prof. Dipti Periwal, Assistant Professor, Prof. Kanchan Ak shay, Assistant Professor, Mr. Sanjay Sapkal, Librarian, Mrs. Dipti Gokhale, Accounts and Administration, Prof. Sandeep Moghe, Assistant Professor, and IT, Prof. Pravin Narang, Assistant Professor and Placements, Prof. Vibhuti Save, Assistant Professor, Examination, Prof. Krunal Punjani, Assistant Professor.

Visit specific objective:

The objective of the audit was

•To verify that the approved management system:

o   meets the needs and expectations of the users of the certification

o   delivers continual improvement

•consider the implications of changes initiated because of change in the client's system, activities, processes and / or products

•confirm continued conformity with certification requirements of revised criteria ISO 9001:2015.

Introduction:

Vidya Prasarak Mandali (VPM) was established in 1935 for the purpose of providing access to all aspiring young and old and unprivileged to primary and secondary education. Currently the institute caters to the need of nearly 14,000 students every day, across faculties in Arts, Commerce, Science, Law, Polytechnic and Management Studies. In order to provide quality management education, a Department of Management Studies was started on 3rd July 1973. In the academic year 2005-06, this was transformed into Dr. V.N. Bedekar Institute of Management Studies (DR VN BRIMS). Owing to the efforts taken by the management, the seat capacity was doubled in a span of two years.

The scope of the certification under ISO 9001, includes only the management courses run by DR BRIMS Institute. Till recently, DR VNBRIMS conducted two courses approved by AICTE, which are MMS with affiliation to Mumbai university and another 2 year full time AICTE approved course of Post-graduation management. It also offered many other part-time courses for working executives to enhance their competencies in management skills. However, this PGDM has course has now been discontinued from 2020 onwards, due to some changes in the regulatory environment.

The scope for the certification renewal audit therefore has been now modified as

"The provision of post graduate programs approved by the All-India Council for Technical Education, leading to the

award of Master of Management Studies (MMS) degrees by the University of Mumbai

An opening meeting was held on 23rd February 2021, where all the senior faculty members were present. The method of auditing, the process-based sampling system, gradation of non-conformances and confidentiality clause was explained to the attendees. The scope of the certification was re-confirmed and confidentiality was assured.

The closing meeting was held after completion of the assessment on 24th February 2021. The observations made during the assessment were explained. The management has assured appropriate corrective actions on the areas of improvement as well as non-conformance observed.

Assessment of:	Top Management interaction		**Assessor:**	Vinay Joglekar
Auditee(s):	Dr. Nitin Joshi, Dr. Mahesh Bhanushali			

Audit trails and sources of evidence:

PGDM is discontinued. To compensate for the same, MMS seats have increased from 120 to 180.

Need for additional infrastructure – 2 more class rooms may be required

Plan has been ready and process of submission to AICTE – FSI not available -have to be created within available space

Termination of the PGDM course did affect the revenue due to difference in fee structure as Rs. 2.5 lacs was the fees for PGDM and Rs. 1.3 Lacs for MMS course. However, the management to appropriate steps to reduce the impact by reducing the cost through discontinuation of the facilities provided to PGDM and addition of seats in MMS seats.

Short term Certificate EPMBA courses are continued (Executive Program in MBA). Certificate is offered from VPM institute and not from DR BRIMS.

Good response for EPMBA courses from corporate world.

Shifting towards OBE – Outcome Based Education as per the new guidelines issued by AICTE.

5 outcomes defined such as -Can the student make decisions, can he analyse, can he demonstrate innovation etc.

5 % seats from EWS were allowed by GOI – Tuition fee waiver scheme TFWS - 9 students for capacity of 180 students.

Govt. focus is currently on improving the Gross Enrolment Ratio (GER) – increase no. of people who got some educational qualification, - the focus could also be quality of education.

To improve the quality of research papers, govt has become strict – how many papers published in SCOPUS., is being considered.

New Education policy - no impact on MBAs, though it may impact the Polytechnique institutes largely.

Mentors program – identify type of work and field of work (Sector). This is to create a Differentiating factor for the institute as compared to other institutes offering MMS course.

Evaluation and conclusions:

Due to some changes in the regulatory requirements, the management has decided to discontinue the PGDM program run by the institute. As an alternative, the management has increased the no. of seats for MMS from 120 to 180 and appropriate approvals have been obtained.

Currently the additional students are being accommodated in the existing infrastructure. However, there are plans to create additional infrastructure to give further facilities to the additional students.

The drop in revenue due to difference in the fee structure of PGDM and MMS course, is offset to some extent by reduction in the cost to run the course such as cost of Singapore trip as an international intervention, as well as reduction in the staff.

Certificate courses are going to continue offered by VPM which are short-term courses designed to meet the customised needs of the industry. However, these are out of scope of the ISO 9001: Certification.

The management is considering mentoring as value addition to regular MMS course, which will help the students in planning their career depending upon their capabilities and competencies.

Areas for attention:

None

Assessment of:	Management Elements	**Assessor:**	Vinay Joglekar
Auditee(s):	Dr. Mahesh Bhanusahli		

Audit trails and sources of evidence:

Changes to organizational context, Management review, Internal Audits, Continual improvement, Management of change (System & Organisation), Corrective action, Management of complaints, Performance against the client's management system objectives, Use of Logo.

Quality manual –QM-01 – Issue no. 2 – revision no. 1 – 08-01-2021 - VMV changed

Vision – To be Top of Mind Institute offering Value added courses - measurability and timeline?

Scope changed – PGDM dropped

Quality objectives.

Reviewed the objectives for the institute as well as each department. Most of the parameters are meeting the targeted levels of performance. There was some drop seen in the average salary due to the Pandemic. However, the performance is seen to be revising.

Internal audits – 7 audits planned -each in October 2020 and Feb 2021 – all conducted

Internal audit report dated 11-02-2021 -audit no. 2- auditors – Dr. Mahesh Bhanushali, and Porf. Kishore Nimkar - Audit of Library – review objectives – review the sequence of events and check effectiveness of process in line with internal customer's expectation

NC/ Observation – analysis required to be done has been closed.

Minutes of MR meeting held on 03-12-2020

Review of performance on the objectives to be part of MRM agenda

Corrective action – NC closed – ADC review meetings started. Format for CR review by ADC started from 04-03-2020. Root cause – Topics were actually covered, but not documented.

Student satisfaction surveys – indices are above targeted level of performance

Legal compliance

Approval from AICTE for 180 seats – for the course in the year 20-21 – dated 13-06-2020

Approval from DTE date 28-10-2020 for increase in seats from 120 to 180

University of Mumbai approval for increase in seats from 120-180 in the academic year 2020-21 – letter dated 21-08-2020.

Evaluation and conclusions:

The management has revised the quality manual and new Vision, Mission and Values has been defined as well as change in scope has been recorded.

While the management has defined the new Vision for the institute, it may be supported by appropriate measurement system and timelines to indicate achievement of the same.

Quality objectives have been defined and are being monitored. However, the management may like to link the

same with the Vision statement.

Some of the objectives may be reframed or revised for better understanding and communication to the people concerned and some the metrics and targets also could be reviewed.

The management has been conducing the internal audits. There have been no non-conformances observed during the internal audits conducted. The management may like to collate the observations and analyse them for prioritising the areas of improvement.

While conducting internal audits, the emphasis was seen on compliance with the process being followed. However, the auditors may like to review the performance on the objectives of the function / department, to ascertain the effectiveness of the processes.

While data on the performance of the quality objectives is being collated, the management may like to review the same as an indicator of effectiveness of the processes as a part of the management review meeting.

Areas for attention:

Review the measures or indicators to indicate fulfilment of the Vision as well as timelines.

Review the objectives statements to make them more relevant and appropriate.

Ensure that the objectives are helping to achieve the Vision statement.

Collate the observations in internal audits and review status of related corrective actions.

Review performance on quality objectives during internal audits.

Review of performance on quality objectives to be part of MR meeting agenda.

Assessment of:	MMS		**Assessor:**	Vinay Joglekar
Auditee(s):	Dr. Smita Jape, Dr. Pallavi Chandwaskar, Prof. Sandeep Moghe			

Audit trails and sources of evidence:

Academic Process – Dr VNBRIMS SOP 10 – Issue no. 2, Rev 00 Dated 01-09-2018

Quality objectives defined and monitored.

Definition of attainment level no 1. 60 % of average or 60% of students above 60% and above marks to be corrected.

MMS objectives to be congruent with Institution objectives.

External faculty Sameer Apte – Career planning session taken on 27-01-2021 – feedback score was 4.5 on a scale of 1 to 5.

Faculty feedback analysis - semester 3 Finance specialisation – November 2020 feedback – most of the feedback is above 8.46, on a scale of 1 to 10 – concerned faculty has been communicated areas of improvement.

Attendance is a requirement of university – may be included in the objectives

Course reviewed for semester 3 for Subject of HR – and Topic of training and development

Requires 40 hours and 13 sessions – all sessions delivered from 4th Aug to 2nd November 2020. 13 sessions held – CR signature was obtained.

May develop a mechanism to measure 'high quality' of education

Feedback from placement cell collated –new courses introduced like Integrated marketing communication,

Commercial banking, OD and change management and operation -application and cases – all subjects have been included in sem 4

Student feedback survey – on quality - 46% strongly agree and 48% agree – 94% total – top 2 box performance - survey taken in April 2020 – next survey due on April 2021.

Risk assessment – timeline, responsibility to be added for additional actions – post action assessment of risk number.

Evaluation and conclusions:

The activities of MMS course delivery are being generally carried out as per the management system of the company as well as ISO 9001:2015 criteria requirements.

The quality objectives have been defined and are being monitored.

The measure for the course objectives of attaining higher levels in the MMS course is a weak area. It was observed that one of the measures for measuring attainment level 1, 2 and 3, was not as per the recommendation of the University of Mumbai, and this led to indicating the attainment level which was lower than the actual, thereby impacting the brand image of the institute adversely.

The objectives and measures for the MMS course may be reviewed to be in alignment with the objectives and measures being monitored at Institutional level. Similarly, attendance level, is a requirement of the university and the same may be added in the measures for the quality objectives as well. The Vision statement of the institute indicates provision of High-quality education and to be 'top of Mind' institute. These elements of Vision statement also may be supported by appropriate measures, and time-lines.

While student feedback on the faculty performance is being gathered, the management may like to study the trend in the performance levels to assess the effectiveness of the improvement actions taken based on the earlier feedback.

Risk assessment has been carried out. The management may like to add responsibility as well as timelines for the risk mitigating actions.

Areas for attention:

Review measure for attainment levels of course objectives, as required by the University guidelines.

Review other measures for quality objectives as well as Vision statement

Study trend in the faculty performance levels to assess effectiveness of actions.

Assign responsibilities and timelines for the risk mitigating actions.

Lloyd's Register

Assessment of:	Library		Assessor:	Vinay Joglekar
Auditee(s):	Sanjay Sakpal			

Audit trails and sources of evidence:

Library Process – Issue no. 2 rev 01 dated 01-09-2018

Book - Eco. Survey 2017-18 vol. 1 – bill no. BG 203/ 20-07-2018 (Swami Book House)_ – Accession number - 14029 - 2019-03-15 - book available in the library – rack to be indicated in KOHA

Book Supplier -Bharat Grahak Sanstha – bill no. 2012 dated 05-08-2014- all accession numbers given

No. of books required as per AICTE – 500 nos X no. of divisions for each subject – 8 subjects for each semester for 3 semesters and 6 subjects for 4th semester – total 30 subjects X 500 = 15000 books X 3 divisions – Plus 500 books per year to be added for 15 years = 7,500 books to be in stock. The requirement may be reviewed.

User feedback survey index – 94.16% for Jan 2020.

No. of pending books - to be discussed in library committee meetings.

Book pending from Tejashri Murekar - due from 23-12-2019 – email sent on 23-10-2019 – 255 days - no reminder sent afterwards as email provided by university is discontinued – total 49 books pending overdue.

Smita Atul Ragji – book pending for 1415 days Management control Systems – Rs. 475 cost of book.

Book accession no. 6348 – book lost by Student – Amount recovered Rs. 325 on 21-01-2021 Mandar Rajendra Gaekwad – Original price Rs. 195 – status updated- lost and paid

Evaluation and conclusions:

The activities of Library are generally being carried out as per the management system of the institute as well as ISO 9001:2015.

The management may like to review the process flow chart to reflect actual process being followed.

The quality objectives have been defined and are being monitored. The management may review the objectives to ensure fulfilment of the 'customer' needs and expectations of receiving the books in reasonable time such as student satisfaction survey index may be added as a measure.

The management may also like to link the process flow charts with the measures for the objectives.

While the book is being received, the accession number is assigned in the KOHA system for tracking the book. The management may also like to assign the location or the rack number in the KOHA system for ease in retrieving the book when required.

The process of recovering books pending to be received from the students after the due date, is a weak area. The management is also not able to send more than one reminder as after the student separates from the institute, the e mail id provided the institute is discontinued. In absence of this control on the process of recovering the books, the management may be depriving the students from accessing a copy of the book when needed. The management may like to review the status of books pending to be received after due date, as a part of agenda in the Library committee review meeting.

The management may like to review the system of providing email ids to the students as well as archiving the details of their other email ids, which are collected during the admission process, to be used for maintaining relationship with the student after separation, and also for the purpose of follow up of the pending books.

Areas for attention:

Review the flow chart for the process.
Review the quality objectives to be inline with the customer's requirements.
Link the objective measures with the process.
Assign rack numbers in the KOHA system.
Review number of books pending to be returned beyond due date.
Review the system of providing email ids by the institute to students.
Use the private email ids of students for maintaining relationships after their separation with the institute, including follow up for books.

Assessment of:	Administration	Assessor:	Vinay Joglekar
Auditee(s):	Ms. Dipti Gokhale		

Audit trails and sources of evidence:

Training activities
Staff training – Training session conducted by Vivek Sharma on 26-09-2020
2 days' workshop conducted by Dr. Manohar Kapse on subjects of AI, ML and Data Analytics dates – Form may be developed.
List of training activities planned in 2020-21 - mentoring workshop conducted in Jan 2021 - a survey will be conducted by end of Feb 2021. After the programs will be over, these faculty members will be assigned as mentors – and In April 2021, the effectiveness will be assessed
Training need assessment done for non-teaching staff – Communication and Excel has been identified in training calendar- may be integrated with performance appraisal process– Organisation's requirement etc.
Excel workshop planned in Jan 2021 – could not be held and now planned in March 2021
Competency mapping currently the faculty is as per the AICTE guidelines
Procurement
Purchase requisition received from IT for New Original Projector lamp – approval from Director received dated 12-02-2021 – PO dated 12-02-2021 placed on BVM Infotech – voucher no ?? dated 23-02-2021 -Payment yet to be done
List of equipment like AC, water cooler – AMC service record may be maintained.
Maintenance service for Water cooler near lift – services rendered quarterly in 2019 – last service done on 27-12-2019.
Shree Ganesha enterprises – service record for some equipment in IMS Management 2nd floor – the equipment serviced to be indicated.
Complaint management register being maintained. Now a Google excel sheet is being maintained.
5 ton ductable AC complaint received on 01-01-2021
AC complaint from Sandeep Moghe – reported on 23-02-2021 – attended on 24-02-2021 – google sheet.

Evaluation and conclusions:

The activities of Administration are generally being carried out as per the management system of the company as well as ISO 9001:2015 criteria. These activities include procuring some of the items in collaboration with the corporate office as well as coordinating training of the faculty.

While the items required by the staff members are being procured as and when required, the management may like to improve the process to make it more systematic.

For complaint management, a google sheet has just been started. The same may be systematically monitored and the same may be used for analysing the data to minimise the complaints. Also, time of receiving the complaint as well as time of attending the complaint as well as time of resolving the complaint may be recorded.

Equipment like water coolers and air conditioners are being maintained by awarding annual maintenance contract. The same may be monitored to ensure that promised services are being carried out and as per the agreement within stipulated time.

Training need assessment has been done for the non-teaching staff and some programs are planned. Similar exercise may be carried out for other staff members as well.

The training need assessment may be also carried out in line with the competency level assessment of each staff members.

Areas for attention:

The process of procurement to be more systematic.
Complaint management process may capture times of complaint recording and resolution etc and analysis may be carried out.
Monitor annual maintenance service performance.
Training need assessment may be integrated with performance appraisal system for teaching staff as well in line with the competency level assessments.

Assessment of:	Information Technology		Assessor:	Vinay Joglekar
Auditee(s):	Prof. Sandeep Moghe			

Audit trails and sources of evidence:

IT complaint management system – record resolution time.
Complaint from Praveen Narang – date 20-02-2021 – attended – on same day – kept under observation for one week, hence not closed.
After studying the trend of complaints, upgraded RAM for 3 PCs and later changed to all PCs.
Auto back up system provided for all user PCs
List of software and their licences validation.
IT lab -120 seats capacity
Laptop processors updated
Requisition on 22-12-2020 for – 15 laptops total – 4 PCs upgraded -and later all 15 upgraded
Budget made for resources in 2020-21.

Evaluation and conclusions:

The activities of IT complaint management are being carried out as the management e system of the company as well as ISO 9001:2015 criteria requirements.

The complaints related to IT hardware etc, may also capture the time of receiving and attending the complaints.

Areas for attention:

Capture time of complaint receipt as well as complaint resolution and analyse the data.

Assessment of:	Placement	**Assessor:**	Vinay Joglekar
Auditee(s):	Praveen Narang, Ms. Shweta Nair		

Audit trails and sources of evidence:

Quality objectives – To facilitate final placement, to facilitate Summer internship, to develop students to meet industry requirements – hold preparatory sessions, and also to enhance industry academia relationship.

SOP -07 issue no. 2 – rev no. 01-09-2018

Measures to be added for summer placements, no. of companies as a measure for relationship between the industry and academia.

Objectives are being revised

Placement is approx. 70%

Industry feedback shared with team on 14-12-2020 on the students interviewed

No. of companies for interview -125

Action taken on the feedback – Placement training awareness sessions conducted on 18-02-2020- 14 students attended- % of students attended may be worked out.

21 Jan 2021 opportunity from ICICI - responded on 22nd Jan 2021- communicated the list of students to the company – total 39 students shortlisted.

Aptitude test conducted on 30-01-2020 – 13 passed and qualified for further interviews.

Finally selected 8 students – confirmed on 06-02-2021

Student feedback on placement received and collated.

Evaluation and conclusions:

The activities of placement services are being carried out as per the management system of the company as well as ISO 9001:2015 criteria requirements.

Feedback from the industries coming for interviews is being captured very systematically and used.

The quality objective measures may be reviewed to include no. of companies, no. of job opportunities, as well as summer placements.

The quality objectives may be reviewed and appropriate measures may be developed for objectives such as Relationship between industry and academia.

Areas for attention:

Review measures for the quality objectives.

04. Next visit details

Standard(s) / Scheme(s)	ISO 9001:2015		Visit type		Surveillance 1	
Audit days	1.00 DAY		**Due date**		February, 2022	
Team	TBD					
Site			Audit days	Delivery Method	Remote Effort	Activity codes
Jnanadweepa' Chendani Bunder Road ,IN			1 DAY	Onsite	0 DAY	108501,109015

05. Change to certification details

Customer has requested the following changes.

The following scope or scope changes have been reviewed and verified, and are agreed subject to Technical Review.

Scope Details	Scope Type	
	Product	**Site**
The provision of post graduate programs approved by the All India Council for Technical Education, leading to the award of Master of Management Studies (MMS) degrees by the University of Mumbai.	ISO 9001:2015	

06. Appendix

1. Audit Programme/Plan

Both the audit plan and the programme are dynamic and must be in line with the client's developments. Any (last minute) changes are possible with valid reasons e.g. organisational changes, processes, management review results etc. Prior to the closing meeting the audit team should (re)confirm the programme and identify any changes,
E.g. to the management system, extent, time or dates of the audit, competences...

Visit Type	Focus audit	CR	SV1	SV2	SV3	SV4	Focus visit	Certificate Renewal
Due Date	02-2020	23-02-2-21	02-2022	02-2023				Sept 2023
Start Date	25-02-2020	24-02-2021	TBD	TBD				
End Date	25-02-2020	03-03-2018	TBD	TBD				
Audit Days	1	2	1	1				
Separate assessment plan?	N	N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
Any change in workforce numbers that may impact visit duration (if yes add new number)	N	N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
Where identified above see separate current assessment plan for further detail.								
Process / aspect / theme / location *Final selection will be determined after review of management elements and actual performance*								
Opening meeting	✓	✓	✓	✓	✓	✓	✓	✓
Closing meeting	✓	✓	✓	✓	✓	✓	✓	✓
Changes to organizational context	✓	✓	✓	✓				
Management Review	✓	✓	✓	✓				
Internal Audits	✓	✓	✓	✓				
Continual Improvement	✓	✓	✓	✓				
Management of change	✓	✓	✓	✓				
Corrective action	✓	✓	✓	✓				
Complaint Management	✓	✓	✓	✓				
Use of Logo (LR & Accreditation Marks)	✓	✓	✓	✓				
Performance against the client management system objective	✓	✓	✓	✓				
(1)		✓	✓	✓				
Top Management	✓	✓	✓	✓				
Administration	✓	✓	✓					
Academics – MMS		✓	✓	✓				
Placement		✓		✓				
IT. Lab	✓	✓	✓					
Library	✓	✓		✓				
Review, Preview and Planning	✓			✓				

1: Complete the list of organisation (parts), departments and/or processes of the different locations

Scope

Any revised scope will be as agreed in formal correspondence between LR and the client or defined in section 4 of the previous LR visit report.

Scope	The Provision of Management education covering - Two years Full time education program leading to Masters in Management Studies (MMS) affiliated to the University of Mumbai.
Exclusion	Clause no. 7.1.5 – Measurement and monitoring is not included as there are no specific measurement instruments involved in this field of education None

Visit start time (approximate)	10:00	Visit end time (approximate)	18:00

The actual start and finish times for the visit will be agreed at the pre-visit contact with the assessor and recorded in the report introduction.

Additional information

Opportunities for improvement
If we identify opportunities to improve your already compliant system, we will either record them in the process table applicable to the area being assessed or in the Executive summary of the report if they can deliver improvement at a strategic level.

Confidentiality
We will treat the contents of this report, together with any notes made during the visit, in the strictest confidence and will not disclose them to any third party without written client consent, except as required by the accreditation authorities.

Sampling
The assessment process relies on taking a sample of the activities of the business. This is not statistically based but uses representative examples. Not all of the detailed nature of a business may be sampled so, if no issues are raised in a particular process, it does not necessarily mean that there are no issues, and if issues are raised, it does not necessarily mean that these are the only issues.

Legal entity
The accredited legal entity and client facing office that has provided the assessment service in this report is referenced in the applicable agreement for this service.

Generic audit objectives and team responsibilities
The generic audit objectives and team responsibilities are included in the Client Information Note 'Assessment Process'. Any visit specific objectives for the next visit will be recorded in the report of the previous visit and will be addressed through the visit plan for that visit. The assessment standard and roles of the audit team are defined in the assessment visit confirmation sent to the client.

Audit Criteria
The audit criteria consist of the assessment standard and the client's management system processes and documentation.

Additional observers
Any additional observers will be as formally communicated to the client.

2. Separate Assessment Plan

Note: if the visit involves more than one team member and is more than one day duration, an additional plan detailing the activities of each member of the team on each day will be required.

(Day 1) 23-02-2021

10.00	Introductory meeting with management to explain the scope of the visit, assessment methodology, method of reporting and to discuss the company's organisation (approximately 30 minutes). The Team Leader will agree a time to meet with top management to discuss policy and objectives for the management system.
10.30	Top Management

Vinay Joglekar(Team Leader)   <Name>

10.30	Top management interaction.
11.00	MR and QMS Documentation and Management Elements.
13.00	Lunch.
13.30	MMS
15.30	Library
17.00	Report writing
18.00	Close

(Day 1) 23-02-2021

10.00	Review of previous days proceedings
10.15	Discussion of all outstanding issues from previous visits.
10.30	Administration
11.30	IT Lab
13.00	Lunch
13.30	Placement
16.30	Report writing
17.30	Closing meeting
18,00	Close

Note; Information on the objectives of the various visits can be found in the Client Information included in the report or on our website www.lr.org. Furthermore on the website there are Client Information Notes available for the various visit types. The audit criteria and team members date and locations are also stated on the front page of the report. Scope of certification and roles and responsibilities of the audit team members are expressed in the Audit Program Plan.

3. Report Considerations

LR Report considerations		
Have there been any deviation from the original assessment plan:	~~Yes~~/No	If yes detail these in the introduction section of the report along with the reasons for the deviations
Have there been any significant issues impacting on the audit programme:	~~Yes~~/No	If yes detail these in the introduction of the report and amend the APP
Have there been any significant changes that affect the management system of the client since the last audit took place:	Yes/~~No~~	The scope for the certification has been modified
Have any unresolved issues been identified during the assessment:	~~Yes~~/No	If yes detail these within the executive summary section of the report
Was the audit undertaken a combined or integrated audit:	~~Yes~~/No	If yes confirm what type of audit and the standards covered in the introduction to the report.
Was the organisation effectively controlling the use of the certification documents and marks:	Yes/~~No~~	If no document within the reporting table covering the mandatory elements
If applicable has the organisation taken effective corrective action regarding previously identified nonconformities:,	Yes/~~No~~	Record outcome in the findings log against the relevant findings.
Does the management system of the organisation continue to meet the applicable requirements and meet the expected outcomes:	Yes/~~No~~	If no details reasons within the executive summary of the report
Does the scope of certification continue to be appropriate to the activities/products/services of organisation:	Yes/~~No~~	If no then document the actions necessary in relation to the scope in the executive summary of the report and amend the APP as required.
Were the objectives of the visit as defined in the APP fulfilled during the visit:	Yes/~~No~~	If no detail the reasons and any necessary actions in the executive summary of the report and amend/update the APP