

Master Data of Organisation				
Name of Organisation	SANTA ROSA (N.E.) WATER DISTRICT			
Name of corporate group (in case of group certification)	N/A			
Street	Santa Rosa - Fort Magsaysay	Road, Brgy. Rizal, Santa Rosa,		
Postcode / Town / Country	3101, Nueva Ecija, Philippines	S		
Contact	Mr. Joel Felix H. Bernardo			
E-Mail	santarosa wdayahoo.com.ph			
Phone/Fax	(044) 940-6800	(044) 940-6800		
Language	English/ Filipino	. ,		
Scope Description	Supply and Distribution of Water			
	more description regarding	g scope in annex		
Industry / Scope (EA, TA,)	27			
Audit profile				
Standards under contract / Audit type	ISO 9001:2015 2nd Surveillance – remote audit			
Wechsel auf ISO 45001:2018				
System documentation: Revision / Issue	Quality Management System Policy Manual SRWD-MAN-001, Rev 1, 08.07.2019			
Surveillance mode	Yearly surveillance			
Audit team leader / responsible	Maria Luisa Sitchon (MS)			
Audit team	Edmund Angelo Larroza (EL) Elizabeth Villezar (EV)			
Technical expert	Geraldine Garcia Manguiat (GM)			
Trainee	n/a			
Multisite-organisation	All sites are listed in: ☐ Audit Reference Data Sheet ☐ separate Listing ☐ Audit program/ATEA ☐ Multisite-certification (Sample)			
Shift operation	3-shift operation			

SE930243 Audits (ZA):



Audited Standards								
ISO 9001 : 2015		2 nd Surveillance Audit						
Non-applicability of c	hapters: 8.3							
Audit team leader:	Maria Luisa Sitchon	Audit number(ZA):	SE930243					
Certificate number:	PHP QMS 18 93 0005	Valid until:	26.12.2021					
Audit-Details								
Sites	Main Site: Santa Rosa - Fort Magsaysay Road, Brgy. Rizal, Santa Rosa Site 1: Rizal Pumping Station: Fort Magsaysay Road, Brgy. Rizal, Santa Rosa, Nueva Ecija Site 2: Rajal Pumping Station, Brgy. Rajal Sur, Santa Rosa Nueva Ecija							
Audit date	09.10.2020							
Audit duration	2,50 person days remote audit (incl. remote locations if applicable)							

Details for Stage 1 - Audit							
Stage 1 - Audit	not necessary						
Duration Stage 1 - Audit	ISO 9001 : 2015	0,00 person-day (s)					
Date Stage 1 - Audit	not necessary						

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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.

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/	Questionaire(s) / Checklist(s)							
corresponding audit documentation	Additional annexes, number							

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yes 🗌

no 🛚

Summary of results											
ISO 9001:2	015										
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Clause	Audited	Result*	Clause	Audited	Result*	Clause	Audited	Result*	Clause	Audited	Result*
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Additional require	l L	to in	accordance to ISO 1	703	1.20	15	Ш		Audited		l lesult
a) internal audits				702	1.20	10			Addited	- 11	2
			on nonconformities i	den	ified	in previous audit					-
				ucii	inica	in previous addit					1
				th re	egard	to fulfilment of ob	iectiv	es			1
d) effectiveness of the management system with regard to fulfilment of objectives e) progress of planned activities aimed at continual improvement							1				
f) the client's ma) the client's management system ability and its performance regarding meeting of						1				
applicable req	uiren	nents	3								
operational control of the client's processes \(\sum 2 \)											
							2				
) use of marks and/or any other reference to certification \textsquare 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	Details are listed in the section "Detailed results". Fields with a coloured background are obligatory elements in every audit.										
Obligatory el	eme	nts	from A00VA02								

N/A

a) Are temporary sites (i.e installation sites, project locations etc.) available?

b) Which one are visited?



Organisations profile	
Organization Profile	Business registration: Registration Number 217 dated Sept. 27, 1982
	Santa Rosa (N.E.) Water District is a Government-owned controlled corporation (GOCC) and is an autonomous unit politically and economically independent from the local government. On January 2017, SRWD was recategorized as Category B water district.
	Santa Rosa (N.E.) Water District (SRWD) was awarded conditional Certificate of Conformance (CCC) No. 217 on September 27, 1982 by the Local Water Utilities Administration.
	Total Manpower / Shift operation:
	Main site manpower / Shift operatin:
Brief Explanation On Core Processes	Supply and Distribution of Water
Product Types / Services & Application Requirements	Water supply
Any special application of the product / services	No special application of product / service.
Regulatory Requirements /	Certificate of Registration – OCN: ORC0000199582
Licencing Requirements	Certificate of Conformance #217 issued by LWUA
	DOF, DBM, Civil Service Commission, RA 9184 Procurement Act
QMS: QA/QC control	Water testing, Material Incoming inspection, outgoing inspection
Major customer	Constituents of the municipality of Sta. Rosa Nueva Ecija
Legal Or Mutual Relationship With The Central Office (Multisite)	Yes. The operation site has mutual relationship with the central office.
Year's Been Certified	2018

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Summary / explanations of results

Organisational or functional units or processes audited:

Organisational or functional units or processes audited: Management process (management review process), Internal audit process, Admin & Finance MIS, Admin & Finance - HR/Training, Admin & Finance / Warehouse / Property/ QC/QA, Incoming Inspection, Admin & Finance (Commercial Services): Customer Services (reconnection, service disconnection, (temporary & permanent), meter calibration services, meter reading and billing), New service connection and outgoing inspection (pre and post), Site 1 and 2: Production (Included In-Process Inspection) Pumping station (water analysis, calibration).

Aspect of the company and/or audit to be hilighted:

No activities/or situations found during audit that the company has plan to change, process change, new equipment technology.

Summary of the findings in this visit:

NC A	0
NC B	0
PI	6
GP	2
СМ	2

Last year's Non Conformity Verification for Effectiveness:

No non-conformity highlighted from last year's audit.

Reason selecting the site audited to be detailed (if any):

Site 1 and Site 2 were also audited remotely to verify the effectiveness of the controls implemented.

Expert feedback (if using expert): Not applicable

Technical expert was employed during this audit to guide the auditors on technical matters. Her overall assessment of the organization's Quality Management System was affirmative and her agreement to each audit finding is stated on the "Detailed Results" section. Her overall agreement with the result of this audit is denoted by her signature affixed on this audit report.

Remote Audit (if using remote audit):

The 100% remote audit via ZOOM was effective as all the infrastructure requirements were met with secure internet connection. Mandatory requirements like conduct of management review and internal audits are conducted accordingly. All auditees were knowledgeable of the process and documented information was readily available and presented thru screen sharing and sending via email.

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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 operates its management system 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 2020, 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 30.07.2020, audit planning from 28-29.07.2020, audit report(s) from 29.07.2020 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 onsite inspection and examination of documents on a random sample basis.

Potentials for improvement are described in the "Detailed Results" section.

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Notes for the detailed results

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

Stage	Classification	Meaning			
NC A	Major Nonconformity (Nonconformity A)	Nonconformities could be classified as major in the following circumstances: 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)	Nonconformities could be classified as minor, if these do not affect the capability of the management system to achieve the intended results.			
PI	Potential for improvement	Items which would allow optimisation of the management system in relation to the requirements of the relevant standard 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(*):

NC A: Action plan with follow-up Audit or action plan and submission of documents.

NC B: Action plan and if necessary submission of documents.

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Detailed results

No.	Major Noncorformity (Nonconformity A)	Area / Process	Standard:clause	Set date
	None			

	No.	Minor Noncorformity (Nonconformity B)	Area / Process	Standard:clause	Set date
ĺ		None			

No.	PI	Area / Process	Standard:clause
1	Test Report is provided upon installation of flow meter. May consider to set next calibration date based on calibration validity date rather than installation date. E.g. Flowmeter with S/N 19041152 Note: TE agreed to this finding.	Site 1: Production / Calibration	ISO9001:2015 7.1.5
2	Pump Operator's Daily Report is monitored accordingly. Consider to include the required level of chlorine for replenishment in the form and also detail in the results, the level before and after replenishment for better monitoring. Note: TE agreed to this finding.	Site 2: Production	ISO9001:2015 8.5.1
3	Detailed Audit Plan for 28-29 July 2020 contained the scope of the audit, objectives, clauses applicable per process/ function, etc. However, improvement may be considered including applicable regulatory requirements as one of the criteria other than ISO 9001: 2015.	Main Site: Internal Audit	ISO 9001: 2015 Cl. 9.2.2
	Internal audit procedure SRWD-ADMF-002 Rev 00 dated 02 July 2018 was available. However, improvement may be considered on the alignment of clause 5.5.2 page 4 to that of CAR Registry and Internal Audit Findings Summary (acronym differs – procedure states "I" while Internal Audit Findings Summary and CAR Registry state "OFI").		
	Note: TE agreed to this finding.		
4	Instruction Manual for Internal Audit process was available and presented as SRWD-ADMF-002 Rev 00 dated 02 July 2018. However, improvement may be considered reflecting the latest version of referenced document i.e., PNS/ ISO 19011: 2018.	Main Site: Internal Audit	ISO 9001: 2015 Cl. 7.5.2c
	Note: TE agreed to this finding.		

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No.	PI	Area / Process	Standard:clause
5	Learning and Development for Y2019 and Y2020 were documented and presented during audit. However, improvement may be considered indicating the target training hours and the actual training hours for ease of monitoring.	Main Site: HR/ Training	ISO 9001: 2015 Cl. 9.1.1
6	Construction Order was presented containing the information the action taken (recalibration of water meter) by the in-charge personnel. However, improvement may be considered recording the reference number of the measuring equipment used in the recalibration (e.g. CO# 20-06579). Note: TE agreed to this finding.	Main Site: Commercial Services/ Customer Serives	ISO 9001: 2015 Cl. 8.5.2

No.	GP	Area / Process	Standard:clause
1	 Improvement activities initiated by the organization are commendable. Additional CCTV installations on 3 pumping stations Expansion project at Sitio Pitong Gatang, Brgy. Soledad Improvement of pipelines in Brgy. Rajal Sur Upgrade of IT equipment and software Likewise, acquisition of additional 4 units of motorcycles as service vehicles to support operations is commendable. Implemented controls to prevent the spread of Covid19 virus like foot bath, handwashing 	Main Site: Management	ISO9001:2015 5.1
	station, thermal body scanning, disinfection, etc. is commendable.		
2	The consistent well-organized materials and document boxes in their respective storage areas is a good practice.	Main Site: Warehouse	ISO9001:2015 8.5.4



No.	СМ	Area / Process	Standard:clause
1	Actual internal audit activities for San Gregorio Pumping Station (scheduled in July 2020); Rizal Pumping Station (scheduled in August 2020); Malacañang Pumping Station (scheduled in September 2020) and Mapalad I, II, III Pumping stations (scheduled in October 2020) will be checked next audit.	Main Site: Internal Audit	ISO 9001: 2015 Cl. 9.2.2
2	The calibration certificates for below electromagnetic flow meters will be verified on the next audit Serial Nos. 1703202, 1809009, 1802299	Site 2: Production/ Calibration	7.1.5.1



Management of non-conformities			
Nonconformities were not found - the procedure can continue.			
☐ Nonconformities were found.			
Follow-up action:			
NC A: Action plan with follow-up Audit or action plan and the submission of documents			
☐ 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 (Deadline: Within 6 weeks after the last audit day). 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 (Deadline: Within 3 months after the last audit day).			
or			
Action plan and the submission of documents 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 (Deadline: Within 6 weeks after the last audit day). Based upon the action plan the evaluation of the effectiveness and the implementation of corrections and corrective actions take place (Deadline: Within 3 months after the last audit day).			
NC B: Action plan and if necessary the submission of documents			
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 (Deadline: Within 6 weeks after the last audit day).			
Submission of documents (if necessary) 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 (Deadline: Within 3 months after the last audit day).			
Note: The audit team leader directs the non-conformities as needed to the responsible auditor for processing.			

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Results				
Results	ISO 9001:2015			
Fulfilled	\boxtimes			
Open nonconformities				
Not fulfilled				
Follow up actions				
None				
Action plan				
Document review				
Follow up audit				
Next audit				
Recommendations				
Grant/Extension*/Renewing*				
Maintenance*				
Suspension				
Restoring				
Refusing				
Withdrawal				
*) 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

In the next audit, the final evidence of effectiveness, corrections and corrective actions will be assessed for the possible nonconformities from this audit.

The comments and potentials for improvement will be taken up again.

For the next audit it is preliminarily agreed: on or before November 28, 2021

Signatures				
Date: Name: Name:	09.10.2020 Ms. Maria Luisa Sitchon Ms. Geraldine Manguiat	Signature Audit team leader Signature Technical Expert		
Date: Name:	09.10.2020 Engr. Joel Felix H. Bernardo	Signature Representative of organisation		

