Audits (ZA):

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Name of Organisation	GUIMBA WATER DISTRICT				
Name of corporate group	N/A				
(in case of group certification)					
Street	CORNER FAIGAL & DANZALAN STS STA.VERONICA				
Postcode / Town / Country	3115 GUIMBA, NUEVA ECIJA PHILIP	PINES			
Contact	MR. FELIXBERTO C. LEGARDA				
E-Mail	gwdcoc295@yahoo.com				
Phone/Fax	044 6111207				
Language	English / Filipino				
Scope Description	PRODUCTION & DISTRIBUTION OF CITIZEN OF GUIMBA, NUEVA ECIJA				
more description regarding scope in annex					
Industry / Scope (EA, TA,)	27				
Audit profile					
Standards under contract / Audit	ISO 9001:2015				
type	1. Surveillance audit				
Wechsel auf ISO 45001:2018					
System documentation: Revision / Issue	Quality Manual Policy Manual GbaWD-MAN-001 Rev.00 Eff. Mar. 25, 2019				
Surveillance mode	Yearly surveillance				
Audit team leader / responsible	Edmund Angelo Larroza				
Audit team	Veverly Joyner Dimanalata				
Technical expert	Geraldine Garcia-Manguiat				
Multisite-organisation	All sites are listed in: Audit Reference Data Sheet se Audit program/ATEA Multisite-certification (Sample)	parate Listing			
Shift operation	3-shift operation				

.

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ISO 9001 : 2015		1 st Surveillanc	e Audit
Non-applicability of c	hapters: 8.3		
Audit team leader:	Edmund Angelo Larroza	Audit number(2	ZA): SE930284
Certificate number:	PHP QMS 19 93 0025	Valid until:	25.12.2022
Audit-Details			
Sites	Main: CORNER FAIGAL & DANZ GUIMBA, NUEVA ECIJA PHILIPP		RONICA 3115
Audit date	24.07.2020		
Audit duration	2,00 person days on site (incl. rem	ote locations if app	licable)

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

Audit Report (1st Surveillance)

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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.

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)

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review of actions taken on nonconformities identified in previous audit responsiveness to complaints								-			
				with no	aaud	to fulfilm out of a	hisatius	-			1
			agement system vities aimed at co				Dective	5			1
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the client's applicable			system ability an	iu its pe	enom	nance regarding	, meean	y oi			3
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			other reference t								1

audited: X = 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 <u>every</u> audit.

Obligatory elements from A00VA02

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

yes 🖂 no 🗌

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b) Which one are visited?	 No site was visited due to the following reasons: Site is directly affected by Corona outbreak issues (employee shortages, official requirements, trade restrictions) Auditor / Audit team is subject to restrictions regarding
	travel to client's site because of Coronavirus outbreak and related official and / or TÜV NORD restrictions
	Audit for below tempory sites were done remotely.
	Site 1: BRGY. MATURANOC 3115 GUIMBA NUEVA ECIJA PHILIPPINES
	Site 2: BRGY. TAMPAC 2 & 3 GUIMBA NUEVA ECIJA PHILIPPINES

Organisations profile	
Organization Profile	Business registration: Registration Number BIR OCN no. 4RC0000744884 issued 1/1/97 Info for org. Profile. Guimba Water District (GbaWD) was formerly owned, managed and operated by the Municipal Government. The water district is governed by a Board of Directors. Sometime in 1987, P.D. 198 was issued declaring a national policy
	favoring local operation and ocntrol of the water systems and authorizing the formation of local water districts and providing for the government the administration of such districts. In compliance thereto, GbaWD was formally transferred by the Municipal Government of Guimba to Eng'r. Eulogio D. Valeroso by the way of a
	Deed of Transfer dated May 29, 2987 which included all physical assets, machineries, buildings and receivables.
	The service covers installation of new service connections, disconnection, reconnection, billing and collection and after sales services.
	Brief of processes & Important process Installation, Water supply, meter reading and collection, pumping stations monitoring
	<u>Number of effective employees</u> : 70 Shift operation: 3 shifts
	Office hour: 08.00-17.00 Shift duration: Shift A: 06.00-14.00 / Shift B: 14.00-22.00 / Shift C: 22.00- 06.00
	Shift audit justification: With an established shift hand-over process: As an integral part of the communication and control of internal processes, a shift hand-over is audited as a substitute for auditing all shifts. For this reason, an audit of all shifts does not take place, second and third shifts were not covered.
Product Types / Services & Application Requirements	Products /or services : Supply of potable water
	Majors clients : Citizenry of Guimba, Nueva Ecija
Any special application of the product / services	No special application of product / service.

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Regulatory Requirements / Licencing Requirements	BIR OCN no. 4RC0000744884 issued 1/1/97
QMS EA code	EA: 27, Risk: Medium
Statement of implementation :	The organization has been implemented, and maintained management system in accordance to the ISO 9001:2015.
	Strategical direction of the organisation has established by their understanding internal and external issues in related contexts such as economics, technologies, politics, and etc. As well as interested parties needs expectations are determined such as customer, obligations compliance, top management, suppliers, and etc. They have been considered into identification of organization risks & opportunities and the ways to mitigate these risks to the acceptable levels and incorporated into the action plan which measured and monitored in the regular basis.
QMS: QA/QC control	Material Inspection, water sampling test
Legal Or Mutual Relationship With The Central Office (Multisite)	Not applicable
Year's Been Certified	Since Y2019

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Summary / explanations of results

Organisational or functional units or processes audited: Top Management/ Management Review, Internal Audit, Document Control, HR/Training, Site 1 Operations - Production (Including QA/QC inprocess inspection, Maintenance (equipments, service vehicles), Control of outsources process), Site 2 Operations - Production (Including QA/QC inprocess inspection, Maintenance (equipments, service vehicles), Control of outsources process), Finance (Client Requirements) (New connection/ reconnection/ disconnection, Customer satisfaction/customer complaints, Reading, Billing, Collection)

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: 4 GP: 3 CM: 1

Last year's Non Conformity Verification for Effectiveness: Not applicable

Reason selecting the site audited to be detailed (if any): Site 1 (Pumping Station) at BRGY. MATURANOC 3115 GUIMBA NUEVA ECIJA PHILIPPINES and Site 2 (Pumping Station) at BRGY. TAMPAC 2 & 3 GUIMBA NUEVA ECIJA PHILIPPINES were audited through remote audit to verify the effectiveness of controls implemented.

Expert feedback (if using expert): 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 was effective as all the infrastructure requirements were met. All auditees were knowlegeable of the processes were located at the office and documented information was readily available.

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Organisation Audits (ZA): GUIMBA WATER DISTRICT SE930284



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 25.03.19, 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 17.07.20, audit planning from 16.06.20, audit report(s) from 17.06.20 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.

Nonconformities, observations and the potential 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: Classification Meaning Stage Major Nonconformity Nonconformities could be classified as major in the following NC A (Nonconformity A) 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. Nonconformities could be classified as minor, if these do not NC B Minor Nonconformity affect the capability of the management system to achieve the (Nonconformity B) intended results. 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 of the management system worthy of special Positive aspects/ mention (see also point 4.3 if applicable). **Good Practice** Special situation and information to be traced in next audit. CM Comments

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
	None			

No.	PI	Area / Process	Standard:clause
1	Hiring process is established. However, may consider documenting the result/s of the interview/assessment done by the interviewer to the applicant for better control.	Hiring	7.1.2
2	 Preventive Maintenance is conducted. Improvement may be considered in the following for better documentation and control. defining and documenting the frequency of the PM documenting the PM conducted in the checklist 	Site 1 and Site 2: Maintenance equipment	7.1.3
3	Performance evaluation of internal auditors is conducted, may consider defining the rating criteria for better control.	Internal Audit – Performance Evaluation	7.2
4	Daily Operation Logsheet is accomplished accordingly per pumping station. Consider the timely updating of the record to reflect the hourly checking or include remarks if no available data for the specific hour (e.g. due to high pressure/VFD not yet started, etc.) for better monitoring. e.g. Pumping Station: Tampac 2-3 Date: 7/2/20 Time start: 5:30 AM Time of 1 st data: 7:10 AM	Site 2: Production	8.5.1

No.	GP	Area / Process	Standard:clause
1	The conversion of all 8 pumping stations from mechanical to Electromagnetic Flow Meters and the installation of the 2 units of Vertical Booster Pump at Bacayao Pumping Station to support operations is commendable.		5.1



No.	GP	Area / Process	Standard:clause
	Likewise, the construction of the stock room in Bacayao Pumping Station is also commendable.		
2	The 13,535 new service connections as of June 30, 2020 versus the target of 1000 for 2020 is commendable.	Management	8.2.1
3	The comprehensive Reports on Customer Satisfaction Assessment is a good practice. Likewise, the consistent Very Good results for Water Quality, Customer Service, and Facilities since 2019 is commendable.	Customer Satisfaction	9.1.2

No.	CM	Area / Process	Standard:clause
1	The documentation of actions/ justifications for the 2020 unmet targets will be checked on the next audit.	Quality Objectives	10.2

Audit Report (1st Surveillance)

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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			
Open nonconformities			
Not fulfilled			
Follow up actions	81		
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: 24.10.2021

Signatures					
Date: 24.07.2020 Name: Mr. Edmund Angelo Larroza Name: Ms. Geraldine Garcia-Manguiat	Signature Audit team leader				
Date: 24.07.2020 Name MR. FELIXBERTO C. LEGARDA	Signature Representative prorganisation				