



Management System Certification Audit Summary Report

Organization:	Jabatan Perpaduan Negara dan Integrasi Nasional				
Address:	(HQ) - Aras 7-10, Blok E2, Kompleks E, Pusat Pentadbiran Kerajaan Persekutuan 62502 Putrajaya, Malaysia Site 4 – Selangor Tingkat 9, Wisma PKPS, Persiaran Perbandaran, Seksyen 14, 40517 Shah Alam, Selangor, Malaysia Site 5 – Johor Tingkat 20, Bangunan KWSP, Jalan Dato' Dalam, 80000 Johor Bahru Johor, Malaysia Site 13 – Kelantan Tingkat 7, Wisma Persekutuan Jalan Bayam, 15200 Kota Bharu Kelantan, Malaysia Site 15 – Negeri Sembilan Tingkat 12, Wisma Persekutuan, Jalan Dato' Abdul Kadir 70000 Seremban, Negeri Sembilan, Malaysia Site 8 – Kedah Aras 3 Zon B, Wisma Persekutuan, Pusat Pentadbiran Kerajaan Persekutuan, 06550 Bandar Muadzam Shah, Kedah, Malaysia				
Standard(s):	ISO 9001:2008		Accreditation Body(s): UKAS & STANDARDS MALAYSIA		
Representative:	Ms Caroline (caroline@jpnin.gov.my)				
Site(s) audited:	As per address above (6 sites) And other sites not audited are listed below under multi sites listing (11 sites)		Date(s) of audit(s):	Butterworth, P.Pinang (9/9/15) Ipoh, Perak (10/09/15) K.Terengganu, Terengganu (22/09/15) K.Kinabalu, Sabah (28/9/15) Labuan (29/9/15) HQ (7/10/15)	
EAC Code:	36	NACE Code:	75.12,	Technical Area code:	QM36.1
		NACE DSM:	84.12		
Effective No. of Personnel:	920 employees		No. of Shifts:	Normal	
Lead auditor:	Ahmad Amin Isa (ahmadamin.isa@sgs.com)		Additional team member(s):	Nil	
Additional Attendees and Roles	Nil				
This report is confidential and distribution is limited to the audit team, client representative and the SGS office.					

1. Audit objectives

The objectives of this audit were:

- to confirm that the management system conforms with all the requirements of the audit standard;
- to confirm that the organization has effectively implemented the planned management system;

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- to confirm that the management system is capable of achieving the organization's policy objectives.

2. Scope of certification

Management of National Unity, 'Rukun Tetangga' and Unity Kindergarten (Pengurusan Perpaduan Negara, Rukun Tetangga dan Tabika Perpaduan)

The audit covered all the ISO 9001:2008 requirements with exclusion made to Standard clause 7.3 (Design & Development), 7.5.2 (validation of process), 7.5.4 (customer property) and 7.6 (control of measuring devices) as justified in Quality Manual.

[Note: The detail audit scope, particularly identification of the organizational or functional units or processes audited and the time of the audit (including the dates and places where the audit activities (on site or offsite) were conducted) can be found in the Audit Planning Matrix and Audit Plan documents]

Has this scope been amended as a result of this audit? Yes No

[Note: Highlight the changes in the amended scope.

(Example: Technical and geographical extension, reduction and changes)]

This is a multi-site audit and an Appendix listing all relevant sites and/or remote locations has been established (attached) and agreed with the client Yes No

3. Current audit findings and conclusions

The audit team conducted a process-based audit focusing on significant aspects/risks/objectives required by the standard(s). The audit methods used were interviews, observation of activities and review of documentation and records.

The structure of the audit was in accordance with the audit plan and audit planning matrix included as annexes to this summary report.

The audit team concludes that the organization has has not established and maintained its management system in line with the requirements of the standard and demonstrated the ability of the system to systematically achieve agreed requirements for products or services within the scope and the organization's policy and objectives.

Number of nonconformities identified: 0 Major 8 Minor

Therefore the audit team recommends that, based on the results of this audit and the system's demonstrated state of development and maturity, management system certification be:

Granted / Continued / Withheld / Suspended until satisfactory corrective action is completed.

4. Previous Audit Results

The results of the last audit of this system have been reviewed, in particular to assure appropriate correction and corrective action has been implemented to address any nonconformity identified. This review has concluded that:

- Any nonconformity identified during previous audits has been corrected and the corrective action continues to be effective.
- The management system has not adequately addressed nonconformity identified during previous audit activities and the specific issue has been re-defined in the nonconformity section of this report.

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5. Audit Findings

The audit team conducted a process-based audit focusing on significant aspects/risks/objectives. The audit methods used were interviews, observation of activities and review of documentation and records.

The management system documentation demonstrated conformity with the requirements of the audit standard and provided sufficient structure to support implementation and maintenance of the management system. Yes No

The organization has demonstrated effective implementation and maintenance / improvement of its management system and is capable of achieving its policy objectives. Yes No

The organization has demonstrated the establishment and tracking of appropriate key performance objectives and targets and monitored progress towards their achievement. Yes No

The internal audit program has been fully implemented and demonstrates effectiveness as a tool for maintaining and improving the management system. Yes No

The management review process demonstrated capability to ensure the continuing suitability, adequacy and effectiveness of the management system. Yes No

Throughout the audit process, the management system demonstrated overall conformance with the requirements of the audit standard. Yes No

Certification claims are accurate and in accordance with SGS guidance and the organization is effectively controlling the use of certification documents and marks. N/A Yes No

6. Significant Audit Trails Followed

The specific processes, activities and functions reviewed are detailed in the Audit Planning Matrix and the Audit Plan. In performing the audit, various audit trails and linkages were developed, including the following primary audit trails, followed throughout:

- Relating to Previous Audit Results/ Stage 1 Findings/ Certification History:

Previous non-conformity detected (if any) Total of 2 detected NC in previous audit and some observations highlighted in previous audit summary report.

Follow up on the previous NCs, the NC were responded with root cause investigations and corrective actions. Follow up on the corrective actions found all corrective actions were implemented as accordingly and recurrence of NC not detected. Corrective actions are considered effective.

Refer to closed CAR attached in audit report package file

Previous Audit Results (observation / OFI) Improvement actions sighted responding to the weak area / observations reported in previous audit report. Actions taken found satisfactory implemented.

- Relating to this Audit; including any significant changes (eg: to key personnel, client activities, management system, level of integration, etc.):

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Policy / objectives & programmes	Quality Objectives, Continual Improvement and Analysis of Data – Reviewed respective sections/areas quality objectives accordingly. Monitoring of objectives, analysis of data and continual improvement were verified as well.
Documentation and records control including level of integration (for Integrated Management System)	Document and Record Control – The documentation structure & control is adequate and compliance with the standard. The approval, amendment, identification, issuance & obsolete of documents found to be appropriate and accordance to documented procedure. Documents are accessible to all states offices via the internal internet system. Record control, storage, retrieval, identification and retention period are adequately addressed as trail throughout the audit process.
Comments on technical extension/reduction of scope of the certification (if applicable)	Not applicable.
Brief adequacy audit on document (applicable during renewal audit only) [Note: A separate stage 1 audit may be conducted in situations where there have been significant changes to the management system, or the context in which the management system is operating (e.g. changes to legislation)]	A brief site adequacy audit was carried out and the audit examined the client's system documentation and concluded that: <input checked="" type="checkbox"/> No significant changes as compared to previous visit. The management system is well defined, planned to meet the requirements of ISO9001 and is therefore confirmed for its' continuing suitability and effectiveness of the system documentation and internal audit programs <input type="checkbox"/> Significant changes as compared to previous visit. The management system is not well defined, planned to meet the requirements of ISO9001 and is therefore confirmed as inadequate and ineffective of the system documentation and internal audit programs. The inadequacy is reported as non-compliance in section 7 below.
Customer-related and other requirements	NA
Record of management review	Management Review minute dated 21/9/15 and 21/5/15 sighted. Chaired by representative from Top Management. All required agenda such as objective/target, policy, QMS system performance, complaint and internal audit were adequately covered. This appears to represent a satisfactory review by the Top Management to review and confirm the suitability and effectiveness of the QMS implementation.
Record of internal audit	Internal Audit done on 6~28/5/15. A total of 3 Major, 109 Minor and 69 observation were raised. All issues raised were found satisfactory followed-up by related function and level within the organization. Impartiality of internal auditors as appropriately maintained. The results and internal audit done appears to represent a reliable tool that the QMS has been implemented and properly maintained by internal resources.
Compliance evaluation	The was no violation of any applicable rules and regulation as reported since the last audit.
Comments on : Corrective and preventive action	Corrective action is triggered via CAR form following any customer complaint or internal related non-conformity raised/received, including non-conformity raised during IQA.
Complaint (external / Interested parties), appeals	A total of 29 customer complaints were received in year 2013 commenced for RT and SRS while only 17 received regarding TP. These have been reported and registered in the CAR form and replied to

	customers accordingly. All the CARs were reviewed and found in accordance to standard requirements.
External communication records (e.g. product recall)	No product recall
Customer Satisfaction	Customer satisfaction level is measured through surveys conducted twice a year at districts and states levels. Districts and states levels surveys were reviewed at all the 5 sites audited. Surveys were feedback, complied and analysed by the Head Offices. Response from surveys were encouraging with positive & negative responses were gathered and planned for necessary improvement.
Continual improvement	Overall summary of continual improvement through the used of the quality policy, objectives monitoring, audit results, analysis of data, corrective & preventive actions and management review were found in place except for nonconformity (if any) raised & observations highlighted.
Use of certificate and logo	The organization uses the logo and the certificate (e.g. on business cards, company brochures, websites etc.) in compliance with SGS on the use of logo.

In summary, based on files reviewed and access to records of complaints and/or accident report, the organization has investigated its own systems and procedures and taken appropriate corrective action which include measures for but not limited to the followings: *(tick where appropriate)*:

- Notification to appropriate authorities if required by regulation : N/A Yes No
- Restoring conformity as quickly as practicable N/A Yes No
- Preventing recurrence N/A Yes No
- Evaluating and mitigating any adverse product/service quality and their associated risks N/A Yes No
- Ensuring satisfactory interaction with other components of the respective basis standard of management system N/A Yes No
- Assessing the effectiveness of the corrective / preventive measures adopted* N/A Yes No

Other legible, identifiable and traceable records to the activities audited based on random sampling process were:

- Unity Management Division – This was the new division established and included under the new scope extension. The division comprised of two sections i.e. Administration of Social Harmony Issue (*Pengurusan Perpaduan*) – PP and Administration of Unity Activities (*Perpaduan Masyarakat & Integrasi Nasional*) – PMIN. Establishment of PP was with the objective of monitoring & intervention of any potential incident that could adversely affect national harmony whereas PMIN main goal was managing nationwide activities for the purpose of creating and enhancing community cohesion & national integration. Activities of PP and PMIN sections were limited to Head Office at the moment. Execution of PP activities is already started by 2014 by using e-sepakat system. This system consist of i-kes, i-muhibah and i-pain point beside a few more functional i.e. aras petunjuk risiko (APR with coding of green, yellow and red). A few sample taken such as isu agama – kalaimah Allah dated 10/7/14 for i-kes, public forum Malaysia Agreement 1963 organised by SAPA dated 10/9/14 for i-muhibah. PMIN processes were verified through the established web-based system e-SEPAKAT, e.g. 1) program larian semarak kemerdekaan ke 56 dated 16-20 Oct 2014, bengkel guru penasihat dan pegawai penyelaras kelas rukun Negara JPNIN tahun 2013 dated 1-2 July 2013.

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- Tabika Perpaduan (TP) – Covering processes of Unity Kindergarten opening, application/removal & approval, appointment of administration members, operations, distribution & allocation of food & drinks budgets and relevant collection & TP analysis of data. For all audited sites (JPNIN Butterworth, Ipoh, K.Terengganu, K.Kinabalu, Labuan and Head Office, Putrajaya) audit sampled were checked for several TP, e.g. for Butterworth (TP Taman Merak Jaya SPS), Ipoh (TP Taman Seri Alam – Parit for relocation), K.Terengganu (relocation for TP Alor Lintang 2 – Besut), K.Kinabalu (relocation for Taman Perumahan Pengalat Besar – Papar, KTP Taman Airport B Taman Airport – Sandakan dated 12/3/13), Labuan (relocation of TP Taman Mutiara 2, TP Kg Bkt Kalam, TP Ranche-Ranche), (TP Taman Mutiara A, TP Banting), Pendang (TP Taman Setia), Kota Tinggi (TP Taman Sri Saujana Zon 7), Tanah Merah (TP Banggol Jenerih), Jelebu (TP Klawang). Relevant records were trailed accordingly including necessary trails to be confirmed at Head Office.
- Rukun Tetangga (RT) – Covering processs of establishment of RT areas (including upload to eRT system after approval form Director), appointment of administration members, distribution & allocation of grants, training of administration members, relevant collection & analysis of RT data and application of administration of Skim Rondaan Sukarela (SRS). For all audited sites (JPNIN Butterworth, Ipoh, K.Terengganu, K.Kinabalu, Labuan and Head Office, Putrajaya) audit sampled were verified for several RT, e.g. Butterworth (SRS 19221 Taman Sukun SPT, KRT Taman Alamanda, KRT Ara Damai), Ipoh (RT08068644 KRT Taman Desa Jaya – Larut Matang & Selama, RT08038369 KRT Gagasan Sg Tapah – Kinta, RT08098078 KRT Taman Gemilang – Perak Tengah, SRS78571 SRS Perumahan awam III – Slim River, SRS 78601 SRS Kota Malim Proma 2 – Tg Malim), K.Terengganu (RT11018648 KRT Kampung IKM – Besut, RT11058557 KRT Kg Wakaf Dua – Marang, cancellation of KRT (KRT Kg Pengkalan Pandan – Kemaman, KRT Ladang Sekolah – K.Terengganu), activation of KRT (KRT Rumah Murah Kemasik – Kemaman, KRT Kg Tapah – H.Terengganu), SRS69885284 SRS Persiaran Limbangan Zon B – Besut, SRS 83965205 SRS Alor Limbat – Marang), K.Kinabalu (cancellation for RT (Kampung Hidayat dated 7/8/15, Taman Muhibah – Semporna dated 7/8/15, Desa Sembilingan – Kota Marudu dated 7/8/15), RT12078441 Komuniti Bandar Serra – KK dated 11/3/15, RT12088455 Kg Singgaram Baru – Ranau dated 16/3/15, RT12158400 Kg Taka – Pitas dated 24/2/15, SRS Kg Bukau Zon 4 – Beaufort, SRS Kg Sabinait Baru – Nabewan, SRS53161 SRS Kg Hulu Tjg Gink – Papar dated 27/2/15). Relevant records were trailed accordingly including trails to be confirmed at Head Office, where necessary.
- Aktiviti Perpaduan (AP) – Verified activity for unity programme at district level; i.e. Butterworth (sambutan minggu perpaduan Negeri P.Pinang 4/2014 dated 12/10/14), Ipoh (program bicara perpaduan sempena sambutan minggu perpaduan peringkat Negeri Perak 2015 dated 6/6/15), K.Terengganu (Majlis pelancaran kempen kibar jalur gemilang peringkat Negeri Terengganu 2014 dated 16~18/10/14, K.Kinabalu (kempen kibar jalur gemilang peringkat Negeri Sabah taun 2014 dated 1/11/14, Program My Rukun Negara KRN peringkat daerah Keningau tahun 2015 dated 22/9/15), Labuan (Program pintar kreatif dated 9/11/14, program sayangi daku – Jan~Sept 2014).
- Training & Competency (including staff and teacher) – Verified for several staffs e.g. for Butterworth [Othman Saad (Bengkel bajet bahagian pembangunan komuniti JPNIN dated 27~29/1/14), Murni Zainol (Kursus pengurusan rekod & fail dated 27~28/2/14), Khatijah Abdullah (taklimat pengendalian ISO dated 19/2/14), kursus pemantapan TP dated 1/11/14 attended by TP's teachers], Ipoh (bengkel pemantapan kualiti taska permata perpaduan siri 1/2015 (pendidik / pembantu pendidik) dated 10~12/9/15, kursus tingkah laku kanak-kanak dated 18~21/9/15, noraini S17 – kursus protocol & etiket social dated 20~22/5/14, Chik Asiah N17 – executive talk dated 9/1/14, Lidiawati Zamri – peta laluan kenaikan pangkat bagi kumpulan sokongan & kumpulan professional dated 22~27/2/15), K.Terengganu (Nurul Farhana KTP Alour Lintang 2 - Kursus asas guru / Penolong guru dated 2~9/5/15, Nur Affiah KTP Bkt Chatok 1), Asmawati S32 – program dialog isu semasa Negara 2015 dated 6/9/15, Burhanudin PPN – program cakap-cakap sains : isu pencegahan jenayah masa kini dated 29/1/15, Wan Nur Ilyani S17 – bengkel pegawai penyelaras maklumat laman web JPNIN Terengganu dated 18/1/15, Najwa – bengkel sewaan ruang pejabat siri 2 Zon Utara & Timur dated 24~26/3/15), K.Kinabalu (kursus asas guru & penolong guru TP bil 1 tahun 2014, Esther Dingkawan S41 – bengkel pengoperasian JPNIN Sabah dated 16~18/1/14, Jamaludin S27 – program transformasi minda dated 15-20/6/14), Labuan (Suriani S32 – kursus system e-upload kandungan laman web dated 2~3/12/14, Mimie Duasah S41 – kursus prosedur sebut harga bagi kerja-kerja pembaikan / penyelenggaraan dated 23~25/11/14) from several positions and job responsibilities. Other relevant trails including training calenders and respective training & training effectiveness evaluation records.

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Others secondary interaction processes as per the audit plan was followed through and where appropriate the activities and functions were reviewed and highlighted as either as non-conformities and/or opportunities for improvement points.

7. Nonconformities

①	NonConformity	N° 1 of 8	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
	Department / Function:	Administration of <i>Rukun Tetangga</i> – RT, JPNIN Perak	Standard Ref.:	ISO 9001:2008 (7.5.1)
	Document Ref.:	JPNIN/RT/06	Issue / Rev. Status:	Latest
	Details of Nonconformity:	Procedure no JPNIN/RT06 is referred. Noted that checklist for RT 06 found no evident for RT 08068644.		

②	NonConformity	N° 2 of 8	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
	Department / Function:	Administration of Unity Activity – AP, JPNIN P.Pinang	Standard Ref.:	ISO 9001:2008 (7.5.1)
	Document Ref.:	JPNIN/AP/02	Issue / Rev. Status:	0
	Details of Nonconformity:	Checklist of programme prior to execute of programme found not update for attachment 6 (laporan aktiviti perpaduan). This referred to programme named Sambutan Minggu Perpaduan Negeri P.Pinang 4/2014 dated 12/10/14.		

③	NonConformity	N° 3 of 8	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
	Department / Function:	Administration of Unity Activity – AP, JPNIN Perak	Standard Ref.:	ISO 9001:2008 (8.5.2)
	Document Ref.:	JPNIN/RT/01	Issue / Rev. Status:	6
	Details of Nonconformity:	Action taken for activate of KRT was done in quarterly basis (i.e. meeting, motivation & selection of committee). However, the current result shown the rate is very low (22% against the target of 80%) without any action plan or recovery plan.		

④	NonConformity	N° 4 of 8	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
	Department / Function:	Administration of Unity Activity – AP, JPNIN Perak	Standard Ref.:	ISO 9001:2008 (8.2.3)
	Document Ref.:	JPNIN/RT/01	Issue / Rev. Status:	6
	Details of Nonconformity:	There is evident of last year's quarterly monitoring for activate of KRT. However, the output is not been discussed against the target's 80% of active KRT. Additionally, the report as per attachment D6 and D7 found to be delay of submission by district and state respectively.		

⑤	NonConformity	N° 5 of 8	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
	Department / Function:	Document Control, JPNIN Sabah	Standard Ref.:	ISO 9001:2008 (4.2.3)
	Document Ref.:	JPNIN/SK/10	Issue / Rev. Status:	3
	Details of Nonconformity:	<ol style="list-style-type: none"> 1. New procedure for JPNIN/SK/10 rev.3 was distributed by HQ to state effective on 17/6/15. However, the previos procedure yet to stamp with 'batal' for cancellation. 2. Additionally, this new procedure found lacking of process or guideline for monitoring 		

of training by TP's teacher as well as training conducted by HQ and state level (SUK).

⑥ NonConformity	N° 6 of 8	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Quality Objective	Standard Ref.:	ISO 9001:2008 (5.5.3)
Document Ref.:	Quality Manual	Issue / Rev. Status:	latest
Details of Nonconformity:	The management found inappropriately discussed and communicate the achievement of quality objective related to SRS, TP, RT as well as AP. Therefore the understanding level among the state officer found not alert with current achievement against the target. HQ		

⑦ NonConformity	N° 7 of 8	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Training, JPNIN Labuan / IKLIN	Standard Ref.:	ISO 9001:2008 (6.2.2)
Document Ref.:	JPNIN/SK/10	Issue / Rev. Status:	3
Details of Nonconformity:	There is no evaluation cited for the training conducted by HQ level for the programme named Kursus prosedur sebut harga bagi kerja-kerja pembaikan / penyelenggaraan dated 23~25/11/14 which is attended by Mimie Duasah (S41). This lacking of record also occurred in IKLIN for the training conducted by Jamali Rashid from Terengganu for training of Kursus Komunikasi Berkesan dated 24~26/3/14.		

⑧ NonConformity	N° 8 of 8	<input type="checkbox"/> Major	<input checked="" type="checkbox"/> Minor
Department / Function:	Analysis of data	Standard Ref.:	ISO 9001:2008 (8.4)
Document Ref.:	Quality Manual	Issue / Rev. Status:	Latest
Details of Nonconformity:	Data analysis of customer survey for TP found to be lacking of action to be taken that highlighted by parents as the state already sent over to HQ for further action.		

NonConformity	N°	<input type="checkbox"/> Major	<input type="checkbox"/> Minor
Department / Function:		Standard Ref.:	
Document Ref.:		Issue / Rev. Status:	
Details of Nonconformity:			

Client Proposed Action to Address Minor Non-Conformances Raised at this Audit:

Non conformity description	Comments on proposed corrective action
Refer to section 7 for details	The organization has analyzed causes to each nonconformity listed in section 7 above and has proposed appropriate corrective action to improve effectiveness of its management system and prevent recurrence. Details on cause of the nonconformity and corrective action can be referred to organization's corrective action record appended to this report. The auditor(s) have reviewed all the submitted action plans for NC No. 1, 2 and

found they are acceptable. Verification of all improvement action plans taken shall take place in the next surveillance/renewal visit.

Nonconformities detailed here shall be addressed through the organization's corrective action process, in accordance with the relevant corrective action requirements of the audit standard, including actions to analyse the cause of the nonconformity and prevent recurrence, and complete records maintained.

- Corrective actions to address identified major nonconformities shall be carried out immediately including a cause analysis, and SGS notified of the actions taken within 30 days. An SGS auditor will perform a **follow up visit** within 90 days to confirm the actions taken, evaluate their effectiveness, and determine whether certification can be granted or continued.
- Corrective actions to address identified major nonconformities shall be carried out immediately including a cause analysis, and **records with supporting evidence sent to the SGS auditor** for close-out within 90 days.
- Corrective Actions to address identified minor non conformities including a cause analysis, shall be documented on a action plan and sent by the client to the auditor within 90 days for review. If the actions are deemed to be satisfactory they will be followed up at the next scheduled visit.
- Corrective Actions to address identified minor non-conformities including a cause analysis, have been detailed on an action plan and the intended action reviewed by the Auditor, deemed to be satisfactory and will be followed up at the next scheduled visit.
- Appropriate cause analysis and immediate corrective and preventative action taken in response to each non-conformance as required.
 - Organisation Closed (Received) | • SSC (Auditor) Closed
 - Date:- | Date:-

Note:- Initial, Re-certification and Extension audits – recommendation for certification cannot be made unless check box 4 is completed. For re-certification audits the time scales indicated may need to be reduced in order to ensure re-certification prior to expiry of current certification.

Note: At the next scheduled audit visit, the SGS audit team will follow up on *all* identified nonconformities to confirm the effectiveness of the corrective actions taken.

8. General Observations & Opportunities for Improvement

Generally, all personnel are corporative and positive towards the whole audit process. The operation and other related processes and arrangement show great potential in further system stabilization. Overall, cooperation from all staff enable the audit to be completed successfully as per schedule planned.

The following opportunity for improvement was proposed to further improve the QMS.

Positive comment:

1. Generally, all personnel are corporative and positive towards the whole audit process. The operation and other related processes and arrangement show great potential in further system stabilization. Overall cooperation from all staff enable the audit to be completed successfully as per schedule planned.

Areas for improvement / observations:

JPNIN Penang (state)

1. General - Checklist form for new application of SRS could be update accordance with all the relevant attachment (i.e. list of petrolman & etc). [7.5.1]
2. Form given for RT 02 (Maklumat Asas Kawasan) could be monitor in consistency of information i.e.

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critical case, type of association & etc. [7.5.1]

- Information for report for each programme could be monitor and discussed i.e. strength, weakness, comment of overall programme & etc. [7.5.1]

JPNIN Perak (state)

- Approval from DG (Director General) for any application could be fulfill as most of the attachment was found complete. [7.5.1]
- List of training have been conducted for year 2014 found to be update as well as training evaluation. This approach and practise could be ensure on consistency i.e. individual staff training record. [6.2.2]

JPNIN Terengganu (state)

- Authority level in term of signatory could be consistently practise [5.5.1]
- Checklist for establishment of RT (lampiran RT 06) could be performed accordingly. [7.5.1]
- Record retrieval for training evaluation could be upkeep. [4.2.4]

JPNIN Labuan (state)

- Checklist for preparation of programme (AP) could be intergrate and establish for easy reference i.e. invitation of participant. [7.5.1]

Any unresolved issues identified?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes, please provide details here:		
Any necessary changes to the next Surveillance/Renewal audit plan:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes, provide comments or details here:		

9. Opening and Closing Meeting Attendance Record

Name	Position	Opening	Closing
Refer to ACR			

Appendix 1

Multi-site address list (list all sites audited)

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Site Name / Address	Audit Dates	Activities at this site
<p>Head Office:</p> <p>Aras 7-10, Blok E2, Kompleks E, Pusat Pentadbiran Kerajaan Persekutuan 62502 Putrajaya, Malaysia</p>	<p>6/9/13 (V1R) V2 (24 Sept 2014) V3 (Sept 2015)</p>	<p>Management review, Internal Quality Audit, customer complaint and satisfaction, corrective & preventive action, data analysis, document & record control, human resources, purchasing.</p> <p>Rukun Tetangga : approval process for determining locality, members appointment, grant allotment, members training, data collection, maintenance, locality revision and cancellation.</p> <p>Tabika Perpaduan (unity kindergarten): initiation of classes, pupils intake, institution of committee purchasing of furniture & tools, appointment of teacher, teacher's training, class shifting, grant allocation for meal, data collection and maintenance</p> <p>Unity Management Division</p> <ul style="list-style-type: none"> - Administration of Social Harmony Issue (<i>Pengurusan Perpaduan</i>) – PP - Administration of Unity Activities (<i>Perpaduan Masyarakat & Integrasi Nasional</i>) - PMIN
<p>Site 1 – Kuala Lumpur</p> <p>Suite 105, Tingkat 1, Wisma Mirama, Jalan Wisma Putra 50460 Kuala Lumpur, Malaysia</p>	<p>27/8/13 (V1R)</p>	<p>Administration of Rukun Tetangga and Tabika Perpaduan at state level (processing application, review, submission to HQ for approval, co-ordination of HQ training and monthly data/report analysis) Handing of customer complaint, satisfaction, correction and preventive action.</p>
<p>Site 2 – Penang</p> <p>Aras 5, Bangunan Persekutuan, Jalan Anson, 10400 Pulau Pinang, Malaysia</p>	<p>V3 (Sept 2015)</p>	<p>- as above -</p>
<p>Site 3 – Sabah</p> <p>Aras 3, Blok A, WDT 433, Kompleks Pentadbiran Kerajaan Persekutuan, Jalan UMS Sulaman Likas, 88400 Kota Kinabalu, Sabah, Malaysia</p>	<p>V3 (Sept 2015)</p>	<p>- as above -</p>
<p>Site 4 – Selangor</p> <p>Tingkat 9, Wisma PKPS, Persiaran Perbandaran, Seksyen 14, 40517 Shah Alam, Selangor, Malaysia</p>	<p>V2 (18 Aug 2014)</p>	<p>- as above -</p>
<p>Site 5 – Johor</p> <p>Tingkat 20, Bangunan KWSP, Jalan Dato' Dalam, 80000 Johor Bahru Johor, Malaysia</p>	<p>V2 (13 Aug 2014)</p>	<p>- as above -</p>
<p>Site 6 – Melaka</p> <p>Tingkat 3, Blok Podium, Menara Persekutuan, Jalan Persekutuan MITC, Hang Tuah Jaya, 75450 Ayer Keroh, Melaka, Malaysia</p>	<p>V1r (6/9/13)</p>	<p>- as above -</p>

Site 7 – Labuan No. 4 (A-1), Blok 4, Tingkat 4, Kompleks Ujana Kewangan, Peti Surat 81279, 87022 Wilayah Persekutuan Labuan, Malaysia	V3 (Sept 2015)	- as above -
Site 8 – Kedah Aras 3 Zon B, Wisma Persekutuan, Pusat Pentadbiran Kerajaan Persekutuan, 06550 Bandar Muadzam Shah, Kedah, Malaysia	V2 (20 Aug 2014)	- as above -
Site 9 – Terengganu Tingkat 12, Wisma Persekutuan, Jalan Sultan Ismail, 20200 Kuala Terengganu, Terengganu, Malaysia	V3 (Sept 2015)	- as above -
Site 10 – Sarawak Tingkat 9, Bangunan Sultan Iskandar, Jalan Simpang Tiga, Peti Surat 2384, 93250 Kuching, Sarawak, Malaysia	28/8/13 (V1R)	- as above -
Site 11 – Perlis Tingkat 2, Bangunan Tun Haji Abdul Razak, 01000 Kangar, Perlis, Malaysia	6/9/13 (V1R)	- as above -
Site 12 – Pahang Tingkat 2, Blok A-B, No. 211, 213, 217 & 218, Bangunan Centre Point, Jalan Haji Abdul Rahman, 25000 Kuantan, Pahang, Malaysia	30/8/13 (V1R)	- as above -
Site 13 – Kelantan Tingkat 7, Wisma Persekutuan Jalan Bayam, 15200 Kota Bharu Kelantan, Malaysia	V2 (18 Sept 2014)	- as above -
Site 14 – Perak Aras 3, Block C, Bangunan Persekutuan Ipoh, Jalan Dato' Seri Ahmad Said, 30450 Ipoh Perak, Malaysia	V3 (Sept 2015)	- as above -
Site 15 – Negeri Sembilan Tingkat 12, Wisma Persekutuan, Jalan Dato' Abdul Kadir 70000 Seremban, Negeri Sembilan , Malaysia	V2 (29 Aug 2014)	- as above -
Site 16 – WP Putrajaya Aras 8, Blok E2, Kompleks E, Pusat Pentadbiran Kerajaan Persekutuan, 62502 Putrajaya, Malaysia	TBA	- as above -