



NQA MANAGEMENT SYSTEMS SURVEILLANCE PROCESS AUDIT REPORT

LANDBANK LEASING & FINANCE CORPORATION)

VISIT NUMBER:

4

**DATE OF OPENING
MEETING:**

27/12/2021

**THIS REPORT HAS
BEEN PREPARED BY:**

REGIONAL ASSESSOR:

Rhoda Vi Demesa

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APPLICABLE STANDARD(S):

ISO 9001:2015





AUDIT REPORT PART A - EXECUTIVE SUMMARY

Client Information

Primary Contact:	Raizza L. Gonzales, Noel Calvez		
Address:	15 th Floor Syciplaw Center, 105 Paseo de Roxas Street, Makati City, 1226, Philippines		
Contact Tel:	02-8818-2200 loc 223		
Contact Email:	ndcalvez@lbpleasing.com ; rlgonzales@lbpleasing.com		
Billing Contact:	Raizza L. Gonzales, Noel Calvez		
Billing Tel:	02-8818-2200 loc 223		
Billing Email:	ndcalvez@lbpleasing.com ; rlgonzales@lbpleasing.com		
Audit Conducted at:	Head Office (multi-site certification) <input type="checkbox"/>	Participating / Temporary Site (multi-site certification) <input type="checkbox"/>	Single Site Certification <input checked="" type="checkbox"/>
Audit Conducted as:	Fully On-Site <input checked="" type="checkbox"/>	Split On-Site / Remote <input type="checkbox"/>	Fully Remote <input type="checkbox"/>
System integration (integrated audits only):	N/A		
Additional information on integration (if required):	N/A		
Certificate expiry date(s):	13 December 2022		
Required changes to EAC or NQA Codes applied:	No changes required		

	At this location	Across all locations (Multisite)
Total employees	48	N/A
Repetitive or parallel workers		
Energy engaged employees		
Energy consumption		
Energy uses		
Energy sources		

Energy data only applicable for ISO 50001 audits. Further guidance available in ASR 47:2.1

The date of the next audit is: 28/11/2022 to 28/11/2022



AUDIT REPORT PART A - EXECUTIVE SUMMARY

Audit Information

Audit duration (in days): 2.0md

Scope of certification: **Provision of Leasing and Financial Services**
Scope is appropriate.

Confirmation that audit objectives have been fulfilled: All objectives met.

If no, which objectives have not been met. Note that customers with installation/service activities within their scope must receive a minimum of one on-site visit once per cycle. Failure to achieve this may result in this activity being removed from the client's scope of certification.

NQA Audit Team		Client	Position	Attendance
Lead Assessor	Rhoda Vi B. Demesa	Michael Araanas	President/CEO	Opening and Closing
Member 1	Khen O. David	Raizza L. Gonzales	Head- CSG	Opening and Closing
Member 2		Riza M. Hernandez	Head - ASG	Opening and Closing
		Peter Paul I. Rigor		Opening and Closing
		Noel D. Calvez	Manager	Opening and Closing
		Luz Narciso	Head-Internal Audit	Opening and Closing
		Angelique D. Javier	Mgt. Services	Opening and Closing
		Melody Mercado	IT Officer	Opening and Closing
		Mariette Tan	Acct. Admin Unit Head	Opening and Closing
		Susan Magno	Acct. Admin Officer	Opening and Closing
		Ben N. Solacito	Appraiser	Opening and Closing
		Keneth S. Sta. Rosa	Acctg. Head	Opening and Closing
		Ian Ll. Ramo	Mgt. Service Specialist	Opening and Closing
		Jimlyn Almene	AO	Opening and Closing

** Mandatory attendance at OHSAS18001 / ISO45001 Audits. If these mandatory positions are not present at closing meeting, record and justify reasons in the Executive Summary.*

Details of Changes

Type of action or change required	Action Required	Notes
Client Name Change:	<input type="checkbox"/>	
Change of Address:	<input type="checkbox"/>	
Scope Change:	<input type="checkbox"/>	
Contact Change:	<input type="checkbox"/>	
Number of Employees Change:	<input type="checkbox"/>	
Major NCs Raised:	<input type="checkbox"/>	
Special Visit Recommended:	<input type="checkbox"/>	
Other:	<input type="checkbox"/>	



Executive Summary

SUCCESSFUL AUDIT:

The organisation’s context is well defined, leadership has been effectively demonstrated and commitment levels are evident.

This is reflected in the levels of compliance with requirements and operational control evident at the organisation during the audit process.

The availability of documented information to demonstrate that the system is well implemented and well understood throughout the organisation is acceptable.

This audit has involved a review of system administration activities, a review and sample of site activities as well as review of job-related records.

It was not fully evident that the key policy commitments are being adhered to.

Grateful thanks are passed to **LLFC** for their time, assistance and hospitality during this audit.

It should be noted that this audit report is based on a sample basis a fully comprehensive audit has not been undertaken.

Good Points:

1. The Top Management commitment in consistently implementing the Quality Management System is commendable.
2. The comprehensive management review inputs and minutes of meeting is commendable.
3. The well-rounded internal audit implementations is commendable as follows:
 - The conducting of Internal Auditor’s Performance evaluation in selecting the audit team is commendable.
 - The Internal Audit Checklist with ISO Standard Clauses of requirements is noteworthy.
 - The consistency in the conduct of Internal Auditor Performance Evaluation after the audit
 - The conduct of comprehensive internal audit to Procedures’ Risk Assessment
4. The LBP-LLFC’s conduct of customers satisfaction survey last August 30 to September 28, 2021 despite of pandemic situation is noteworthy.
5. The provision of “Calamity Rehabilitation Support (CARES) Program to cater the Customer’s needs during the pandemic situation is commendable.
6. The improvement made by the Account Management Group to the previous NQA audit findings is noteworthy.
7. The improvement made by the Account Servicing Group to the previous (2020) NQA audit findings is noteworthy.
8. The paper-recycling program is a good practice.
9. The well-organized filing and organization of records of Account Management Group & Account Servicing Group is noteworthy.
10. The active participation of all staff/auditees is noteworthy.
11. The detailed results of 2021 LBP-LFC Customer Satisfaction Survey is commendable.
12. The provision of training(s) for the Directors is noteworthy.

Major NCs	0	Minor NCs	0	OFls	5	AoCs	0
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Is there any conflict of interest which exists between the Auditor(s) and the client, and are there any situations known to them that present themselves, or NQA, with a potential conflict of interest in respect to the audit undertaken?	No.
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Audit Conclusion

- This visit was Satisfactory: Continuation or granting of certification is recommended
- Opportunities for Improvement have been identified
- Any findings are as detailed on the following page(s).

Audit Follow-up Actions

The following post-audit action(s) shall be taken by the client: OFIs to be considered and action taken when appropriate.

Please note that certification will not be granted, reissued or revised until all outstanding Non-Conformance responses have been submitted, and in the case of Major Non-Conformances, the evidence of corrective action has been provided to, and accepted by, NQA.

For further information, useful guidance and further support for responding to audit findings, please visit <https://www.nqa.com/en-gb/clients/non-conformities>

Management system performance, such as trends in audit findings that require further investigation at the next recertification audit.

Mandatory completion at the Head Office Audit of Surveillance Year 2

The management system performance was verified effective. The noted opportunities for improvement noted in this report require verification at next surveillance audit.



AUDIT REPORT PART B – AUDIT REPORT

Audit Findings

Ref No.	Clause No.	Details of any finding(s) raised.	Type (Major NC, Minor NC, OFI or AoC)
01	9.3.2/9.3.3	<p>1) The Status of Opportunities for Improvement – External Audit addresses the 1st Surveillance Audit (December 18, 2020). However, consider improving the Management Review/Minutes of Meeting input(s) to “Audit Results” to include the previous and latest NQA audit findings status in the conduct management review and minutes of meeting. e.g., Quantitative Trends from the start of QMS ISO 9001:2015 implementation</p> <p>2. Also consider ensuring to add the required Management Review Outputs as prescribed by ISO Standard clause 9.3.3 as follows: The outputs of the management review shall include decisions and actions related to:</p> <p>a) opportunities for improvement b) any need for changes to the quality management system; c) resource needs.</p>	OFI
02	6.1.1, 6.1.2, 9.2.2	Consider reflecting the internal audit’s risks and opportunities prescribed by the ISO 19011:2018 Guidelines for Auditing Management Systems.	OFI
03	7.1.2	<p>1. Need to ensure that the job description is acknowledged by the newly hired employee.</p> <p>2. May consider to complete the filled-out records of the Individual Performance Commitment Review, it has no evaluation date.</p> <p>3. Consider to ensure that the professional license of the certified public accountant is valid/updated.</p>	OFI
04	7.2	Need to ensure that there is training effectiveness evaluation both for internal and external training attended/conducted.	OFI
05	7.5.2/ 7.5.3	<p>1. Need to ensure that the registered documents like Supplier Evaluation Form with Guidelines on Performance Evaluation of Suppliers are within the coding requirement of Control of Documented Information Procedure.</p> <p>2. Need to include the details of revision in the revision history section.</p> <p>3. Need to define in the control of records procedure the manner of disposal of the established records.</p>	OFI
End of Findings			

Note: Responses to findings must be sent using the Corrective Action Plan form, as applicable, to caps@nqa-ph.com within the timeframes stated on Page 5.

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