

Assurance Quality Certification LLC	F19EN18
ISO 50001:2018	Issue 01
Stage 1 Energy Audit Report	Rev 05

Name of the Organization	SOVARANI MEMORIAL COLLEGE	
Address	Jagatballavpur, Howrah – 711408	
Site Address (If any)		
No. of Employees	Teaching = 61, Non-teaching = 9, House-keeping =2, Care Taker =1, Security =2, Total = 76	
No. Of Shift	1	
E mail id	srmcollege.edu@gmail.com	
Contact Person	DR. MAHADEB PAUL	
Telephone/Fax	03214 255038	
Scope	“Teaching, Learning and Evaluation processes relating to awarding of Arts, Science and Commerce as well as general learning considering Environment friendly and Energy efficiency manner in College Green Campus”.	
Technical Area	Teaching, Learning and Evaluation, Capacity Building, Skill Enhancement, Institutional Social Responsibility	
Audit Team	Lead Auditor: Amalesh Kr. Mandal Auditor: Technical Expert	Audit duration Man day(s): Technical Expert
Starting date of Audit	21.06.2023	
End Date of Audit	21.06.2023	
Brief about the organization	<p>Sovarani Memorial College, this institution of higher learning was founded by Late Satyanarayan Khan in 1971 in memory of Sovarani Debi, his beloved better half. 1st December is the College-Foundation -Day. Presently, eleven Honours subjects and sixteen General Course subjects are being taught in the CBCS(Choice Based Credit System).. We do have an NCC-unit, an NSS-unit which are being run smoothly under the active guidance of an ANO and a Program- Officer respectively. Also we have a gymnasium which needs to be used on regular basis. Our central library is well equipped with a huge collection of books, journals and modern facilities. There are departmental libraries and the laboratories are well equipped.</p> <p>But the most striking point which needs to be mentioned is that owing to lock down imposed by the State Govt. in compliance with the directives of the Central Govt. to prevent spread of Novel</p>	

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	<p>Corona Virus(COVID-19), the Teaching -Learning process has been tremendously hampered. This lock down will definitely cause deferment of everything namely the University Examinations(Even- semesters, Part-III), Admission of students in Semester-I classes for the session: 2020-2021,Publication of various results etc. Though online classes are being held as much as possible but this can, in no way, replace the system of normal classes where the students can interact directly with the teachers.</p> <p>It's a matter of satisfaction that the grant received under Component 9,RUSA(2.0) is being utilised in causing infrastructural development of the college. This development includes construction of buildings, e-procurement of equipments which will make the laboratories more and more equipped. It is expected that there would be further development because 2nd installment of grant under RUSA(2.0) is going to be received by the college. In these development- programs, wholehearted cooperation of the teaching faculties, non- teaching staff, other stakeholders and the local people is indispensable. So, we hope for the best in the days to come.</p>
Audit Objective	To evaluate the client's documented system, location & site-specific conditions and gather other details through discussions with the client's personnel to determine the organization's readiness for the Stage 2 Audit for Certification

CHANGE DETAIL

Audit Duration for Stage 1	
Are quoted man-days adequate?	Yes
Any change in employee detail?	None
Any Change in Scope?	None
Any additional Information:	None

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ATTENDENCE SHEET:

NAME OF PERSON		DESIGNATION
Amalesh Kr. Mandal	<i>Amalesh Kr. Mandal</i>	Lead Auditor
Dr. Mousumi Pal	<i>Mousumi Pal</i>	IQAC coordinator
Dr. Malay Saha	<i>Malay Saha</i>	IQAC member
Paromita Sarkar	<i>Paromita Sarkar</i>	IQAC member
Dr. Nikhilesh Metiya	<i>Nikhilesh Metiya</i>	IQAC member
Koushik Tarafdar	<i>Koushik Tarafdar</i>	IQAC member
Dr. Chaitali Pal	<i>Chaitali Pal</i>	IQAC member

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SUMMARY OF AUDIT

AREA OF IMPROVEMET	
(Areas of Improvement Which May be Identified as Non Conformities During Stage 2 Audit)	
1	Communication/Display of policy
2	Communication/Display of Objectives

Non Conformities Raised

0 Minor/Major Non conformance identified in the Stage 1 audit, details of Non Conformance in F50.

Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Lead Auditor

Sign Off : Date 21.06.2023	
AQC Report Submission	Client Acceptance for Report
Name of Auditor: Amalesh Kr. Mandal	Name: Dr. Mousumi Pal
Signature: 	Sign  Designation: IQAC Coordinator
Authorization: Empanelled Auditor from IAF accredited Certification Body, Energy Auditor from National Productivity Council, IRCA Accredited Lead Auditor on ISO 50001:2018	

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AUDIT CHECKLIST

REQUIREMENTS	COMMENTS	Status C/NC/O
Is the Information documented as required as per the ISO 50001:2018?	Manual and other documented information available. (Doc. Ref. No. ENMS/L1, dtd. 02.04.2022) and other documented information available.	C
Has the discussion been held with personnel of the Client company for readiness for stage-2?	Yes. Within next month the Stage-2 needs to be completed, discussed and finalized as per discussion with the Principal and IQAC coordinator.	C
Has the Client site specific conditions been evaluated?	Established, implemented and the Scope has been set as per Site specific. (Under clause 4.3 of ENMS/L1 Manual). They are maintaining their Green monitoring report year to year wise to evaluate the environment performance.	C
Has the company identified energy performance indicators, Energy baseline, Energy objectives, energy targets and energy management action plans?	Respective Energy project found taken by Authority. Like “Efficient use of Energy Resources” *Energy source and power consumption captured in Green monitoring report. Data available.	C
Is the client having understanding with the ISO 50001:2018 Standard requirement and other requirement site specific?	Yes. Awareness training has been conducted by an external consultant. 1. Training on Standard given by External body “Management System Consultancy”	C
Is the scope having boundaries and specific to client organization?	Scope defined in Manual and found as per course delivery.	C
If a client has Multisite then level of control is established.	Not applicable	C

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REQUIREMENTS	COMMENTS	Status C/NC/O
Is organization analyze energy used and consumption based on measurement and other data: (Identify current energy sources/evaluate past and present energy use and consumption?)	Measurement done on Bill monitoring, list of energy sources are available, significant energy sources identified and included in Green monitoring report for review.	C
Based on the analysis of energy used and consumption, is the organization identifying the areas of significant energy use.(identify the facilities, equipment, systems, processes and personnel working for, or on behalf of, the organization that significantly affect energy use and consumption?)	List of energy sources are available, significant energy sources identified. Energy program found. Annual Bill Amount Rs. 235783/- (2022-23)	C
Has the organisation identified EnPIs (energy performance indicators) appropriate for monitoring and measuring your energy performance?	Energy baseline declared as last year consumption. EnPI is set in the form of Energy Projects.	C
Has the organisation identified, implemented and have access to the applicable legal requirements and other requirements to which organization subscribes related to energy use, consumption and efficiency?	SOVARANI MEMORIAL COLLEGE is affiliated the University of Calcutta and offers three year degree courses in Arts, Commerce And Science streams (both Honours and General). NAAC ACCREDITED A-GRADE INSTITUTION.	C
Are the resources adequate for stage 2 audit?	Yes, documented information found established as per standard requirement and organization requirements. So proposed for stage-2 audit. The implementation and monitoring system will be checked in stage-2 audit.	C
Is Internal Audit planned and performed and effective?	Yes, Internal Audit Report w.r.t Year to year Green monitoring checks found conducted and maintained properly against all possible parameters.	C
Is MRM planned and performed and Effective?	Yes, their committee meeting outcome was maintained. Last conducted month of January, 2023	C

END OF REPORT

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Address	Jagatballavpur, Howrah – 711408	
Site Address (If any)		
No. of Employees	Teaching = 61, Non-teaching = 9, House-keeping =2, Care Taker =1, Security =2, Total = 76	
No. of Shift	1	
E mail id	srmcollege.edu@gmail.com	
Contact Person	DR. MAHADEB PAUL	
Telephone/Fax	03214 255038	
Scope	“Teaching, Learning and Evaluation processes relating to awarding of Arts, Science and Commerce as well as general learning considering Environment friendly and Energy efficiency manner in College Green Campus”.	
Technical Area	Teaching, Learning and Evaluation, Capacity Building, Skill Enhancement, Institutional Social Responsibility.	
Audit Team	Lead Auditor: Amalesh Kumar Mandal Auditor: Technical Expert	No of Mandays: 1
Starting date of Audit	12.07.2023	
End date of Audit	12.07.2023	
Brief about the organization	<p>Sovarani Memorial College, this institution of higher learning was founded by Late Satyanarayan Khan in 1971 in memory of Sovarani Debi, his beloved better half. 1st December is the College-Foundation -Day. Presently, eleven Honours subjects and sixteen General Course subjects are being taught in the CBCS(Choice Based Credit System).. We do have an NCC-unit, an NSS-unit which are being run smoothly under the active guidance of an ANO and a Program- Officer respectively. Also we have a gymnasium which needs to be used on regular basis. Our central library is well equipped with a huge collection of books, journals and modern facilities. There are departmental libraries and the laboratories are well equipped.</p> <p>But the most striking point which needs to be mentioned is that owing to lock down imposed by the State Govt. in compliance with the directives of the Central Govt. to prevent spread of Novel Corona Virus(COVID-19), the Teaching -Learning process has been tremendously hampered. This lock down will definitely cause deferment of everything namely the University Examinations(Even-semesters, Part-III), Admission of students in Semester-I classes for the session: 2020-2021, Publication of various results etc. Though online classes are being held as much as possible but this can, in no way, replace the system of normal classes where the students can interact directly with the teachers.</p> <p>It's a matter of satisfaction that the grant received under Component</p>	

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	9,RUSA(2.0) is being utilised in causing infrastructural development of the college. This development includes construction of buildings, e-procurement of equipments which will make the laboratories more and more equipped. It is expected that there would be further development because 2nd installment of grant under RUSA(2.0) is going to be received by the college. In these development- programs, wholehearted cooperation of the teaching faculties, non-teaching staff, other stakeholders and the local people is indispensable. So, we hope for the best in the days to come.
Purpose of Audit	To verify the implementation of the Energy Management System as per the ISO 50001:2018 Standards Requirement, verification of records for the conformity of the implementation.

CHANGE DETAIL:

Audit Duration for Stage 2	
Are quoted man-days adequate?	Yes
Any change in employee detail?	None
Any Change in Scope?	None
Any additional Information:	None

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ATTENDENCE SHEET:

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Dr. Mousumi Pal	<i>Mousumi Pal</i>	IQAC coordinator
Dr. Malay Saha	<i>Malay Saha</i>	IQAC member
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Dr. Chaitali Pal	<i>[Signature]</i>	IQAC member

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SUMMARY OF AUDIT

AREA OF IMPROVEMENTS	
1	No such significant area identified as critical w.r.t energy consumption

Non Conformities Raised

0 Minor/Major Non-conformance identified in the Stage 2 audit, details of Non Conformance in F50

Please respond by using your own corrective action form and include the root cause analysis with systemic corrective action. Failure to include root cause analysis with systemic corrective action will result in your responses being rejected by Lead Auditor




Team Leader Declaration (Tick or cross Each Column as per applicability)	
√	Auditing is based on a sampling process of the available information
√	Audit is combined, joint or integrated;
√	The effectiveness of corrective actions taken regarding previously identified
√	nonconformities has verified
√	outcomes are effective and complying.
√	The internal audit and management review process are effective and complying with the requirements.
√	The scope of certification is appropriate.
√	The capability of the management system to meet applicable requirements and expected
√	The audit objectives has been fulfilled and achieved.

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Recommendation:

√	The quality system complies with the requirements of the reference standard: Congratulations, on the basis of the above summary, Lead Auditor is pleased to put forward a recommendation for Issuance of Certificate. The organization can use the AQC Mark
×	The quality system complies with the requirements of the reference standard with exception of minor NC: Congratulations, Team Leader is pleased to put forward a recommendation for Issuance of the certificate of Organization upon off-site verification of closure of all minor NC within 60 days from the date of Stage 2 audit. Responses to the non-conformances should be submitted to AQC and must include supporting evidence of closure to allow for off-site verification. In responding to the non-conformances, the organization should consider the root cause of the non-conformance and the potential for related issues in other parts of system. If all non-conformances are not closed within 60 days, a full reassessment may be required.
×	Evidence of major non conformities: Organization is not recommended for Issuance of Certificate and at this time. Follow-up audit will be scheduled to allow for on-site verification and closure of all issues within 60 days from the date of Stage 2. Once all non-conformances are closed, the recommendation for Issuance of certification may recommended. If all non-conformances are not closed within 60 days, a full reassessment may be required.
×	Not Recommended: Organization is not recommended for Issuance of certificate at this time. Full Stage 2 audit is required as the organisation has not implemented the system and process at pace.
	<i>Proposed Audit Date for 1st Surveillance Audit 11.07.2024 (mm/dd/yy)</i>

Sign Off : (Date) 12.07.2023

AQC Report Submission	Client Acceptance for Report
Name of Team Leader: Amalash Kr. Mandal	Name: Dr. Mousumi Pal
Signature: 	Sign 
Authorization: Empanelled Auditor from IAF accredited Certification Body, Energy Auditor from National Productivity Council, IRCA Accredited Lead Auditor on ISO 50001:2018	 Designation: IQAC Coordinator

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AUDIT CHECKLIST

VERIFICATION OF DOCUMENTED INFORMATION & RECORDS AS PER STD REQUIREMENT

(C- Conformity, NC-Non-Conformity, O-Observation)

Clause Number	C/NC/ O	Document Verification detail with statement of Conformity
4 Context of the organization		
4.1 Understanding the organization and its context (External and Internal Issues)	C	Identified and included in Manual. (Under clause 4.1 of Doc. Ref. No. ENMS/L1, dtd. 02.04.2022) *To capture those issues Staff and student feedback process was initiated and documented for review.
4.2 Understanding the needs and expectations of interested parties (Need & Expectation of Interested parties)	C	Identified and included in Manual. (Under clause 4.2 of Doc. Ref. No. ENMS/L1, dtd. 02.04.2022) *To capture those issues Staff and student feedback process was initiated and documented for review.
4.3 Determining the scope of the energy management system	C	Scope established and included in Manual. (Under clause 4.3 of ENMS/L1 Manual) Scope defined in Manual and found as per course delivery. Verified against their affiliation.
4.4 Energy management system	C	Process Flow/Process description found established as guided by accreditation norms.
5 Leadership		

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5.1 Leadership and commitment (Ensure Top Management Commitment)	C	Interviewed with Top Management (Here Principal), found committed to communication of respective Energy Policies, Projects and implementation of Energy specific Projects.
5.2 Energy policy (Documented, communicated, availability and Review)	C	Energy Policy established and displayed on the notice board, signed by the Principal. Advise them to display for other stakeholders as well as on the Website.
5.3 Organization roles, responsibilities and authorities (Assigned and communicated by Top Management)	C	Defined in Manual and available in the College office.
6 Planning		
6.1 Actions to address risks and opportunities	C	Risk Register found maintained (Doc. Ref. No. EnMS/POT/E-RISK/01), initially found 3 nos Energy risk identified.
6.2 Objectives, energy targets and planning to achieve them (Consistent with Energy Policy, SEU, documented, measurable, communicated and updated)	C	Energy Objectives found established and planned to achieve action (MAP), Projects taken Like “Efficient use of Energy Resources” and monitoring methodology found set to achieve the goal.

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6.3 Energy review (Current type of energy use, past and current consumption, documented and updated)	C	<p>Energy review has been done based on Meter reading study and kept as documented information.</p> <p>Current list of Energy sources found available including Significant energy sources in their Green monitoring report for review.</p> <p>You may put your current list of energy source here</p> <table><tr><th>Electrical device/items</th><th>Number</th></tr><tr><td>Normal Tubelight</td><td>198</td></tr><tr><td>LED Tubelight</td><td>247</td></tr><tr><td>LED Bulb</td><td>63</td></tr><tr><td>Stand fan</td><td>20</td></tr><tr><td>Ceiling Fan</td><td>152</td></tr><tr><td>Wall fan</td><td>30</td></tr><tr><td>Exhaust fan</td><td>3</td></tr><tr><td>Computers</td><td>71</td></tr><tr><td>Printers</td><td>25</td></tr><tr><td>UPSs</td><td>36</td></tr><tr><td>Water Pump</td><td>02</td></tr><tr><td>AC</td><td>05</td></tr><tr><td>Projectors</td><td>03</td></tr></table>	Electrical device/items	Number	Normal Tubelight	198	LED Tubelight	247	LED Bulb	63	Stand fan	20	Ceiling Fan	152	Wall fan	30	Exhaust fan	3	Computers	71	Printers	25	UPSs	36	Water Pump	02	AC	05	Projectors	03
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AC	05																													
Projectors	03																													
6.4 Energy performance indicators (Documented and updated)	C	<p>Documented in the form of Energy projects.</p> <p>List of projects:</p> <ol style="list-style-type: none">1. Use of LED bulbs and tubes2. Green Generators (02)																												
6.5 Energy baseline (Documented and review periodically and retention)	C	<p>Energy baseline declared as last year Power consumption, accordingly projects taken to review and reduce the Power.</p>																												

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6.6 Planning for collection of energy data (Accuracy and repeatable, documented and retention)	C	Electrical Energy bill statements kept available for further review. Annual Bill amount Rs. 235783/- (2022-23)
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7 Support

7.1 Resources (Determination of resource required)	C	Resource requirements discussed in committee meetings. Outcome of meeting available.
7.2 Competence (determine, documented and retain the competence)	C	Training planning and related training records found available. Awareness training conducted by External consultant. 1. Training on Standard given by External body "Management System Consultancy"
7.3 Awareness (Objective, Policy, Non-Conformance of EnMS)	C	Done through training and display. 1. Training on Standard given by External body "Management System Consultancy"
7.4 Communication (What, When, With Whom, How & Who)	C	Done through display, mail, meeting minutes.
7.5 Documented information (Creation, Updating, Control, Retention, External Origin, Storage & Preservation)	C	Control of documented information procedure established. Control of documented information procedure established.

8 Operation

8.1 Operational planning and control (Documented, Plan, Implement, Control the process related to SEU and communication)	C	Operational procedures established supported with work instructions and related records. Project review checked
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8.2 Design (Documented, Specification, design consideration)	C	Design part not included
8.3 Procurement (Establish & Implement criteria for evaluating energy performance)	C	Effectively implemented, tendering system applicable in procurement. Comparative statement found available against any purchase.
9 Performance evaluation		
9.1.1 General (Monitoring, measurement, analysis and evaluation of energy performance and the EnMS)	C	Criteria set against each Project mapping, to monitor the performance and effectiveness of the Energy performance. Current Status: 1. Project mapping Vs. monitoring
9.1.2 Evaluation of compliance with legal requirements and other requirements	C	SOVARANI MEMORIAL COLLEGE is affiliated the University of Calcutta and offers three year degree courses in Arts, Commerce And Science streams (both Honours and General). NAAC ACCREDITED A-GRADE INSTITUTION.
9.2 Internal audit (Frequency and Effectiveness)	C	Yes, Internal Audit Report w.r.t Year to year Green monitoring checks found conducted and maintained properly against all possible parameters.
9.3 Management review (Frequency and input/output)	C	Yes, their committee meeting outcome was maintained. Last conducted month of January, 2023
10 Improvement		
10.1 Nonconformity and corrective action	C	Procedure established and monitored through project planning.
10.2 Continual improvement	C	Objective and monitoring data found available.

END OF REPORT