



राष्ट्रीय मूल्यांकन एवं प्रत्यायन परिषद
विश्वविद्यालय अनुदान आयोग का स्वायत्त संस्थान
NATIONAL ASSESSMENT AND ACCREDITATION COUNCIL
An Autonomous Institution of the University Grants Commission

Certificate of Accreditation

*The Executive Committee of the
National Assessment and Accreditation Council
on the recommendation of the duly appointed
Peer Team is pleased to declare the*

Government Nehru College

Disaggarh, Dist. Rajnandgaon, affiliated to Pt. Ravishankar Shukla University, Chhattisingarh as

Accredited

with CGPA of 2.21 on four point scale

at B grade

valid up to November 14, 2020

Date : November 15, 2015



[Signature]
Director



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Quality Profile

Name of the Institution : Government Nehru College

Place : Dongargarh, Dist. Rajnandgaon, Chhattisgarh

Criteria	Weightage (W_i)	Criterion-wise Weighted Grade Point (Cr WGP _i)	Criterion-wise Grade Point Averages (Cr WGP _i / W_i)
I. Curricular Aspects	100	150	1.50
II. Teaching-Learning and Evaluation	350	880	2.51
III. Research, Consultancy and Extension	150	290	1.93
IV. Infrastructure and Learning Resources	100	230	2.30
V. Student Support and Progression	100	220	2.20
VI. Governance, Leadership & Management	100	210	2.10
VII. Innovations and Best Practices	100	230	2.30
Total	$\sum_{i=1}^7 W_i = 1000$	$\sum_{i=1}^7 (Cr WGP_i) = 2210$	

$$\text{Institutional CGPA} = \frac{\sum_{i=1}^7 (Cr WGP_i)}{\sum_{i=1}^7 W_i} = \frac{2210}{1000} = \boxed{2.21}$$

Grade = B

Descriptor = GOOD

Date : November 15, 2015



Director

- This certification is valid for a period of Five years with effect from November 15, 2015
- An institutional CGPA on four point scale in the range of 3.01 - 4.00 denotes A grade (Very Good), 2.01 - 3.00 denotes B grade (Good), 1.51 - 2.00 denotes C grade (Satisfactory)
- Scores rounded off to the nearest integer

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(ISO 9001:2015, ISO 14001:2015 & ISO 50001:2018)	Issue Date. 13/08/2021

GOVERNMENT NEHRU P. G. COLLEGE

DONARGARH, DISTT. RAJINGAON- 491445

CHHATTISGAR, INDIA

**INTIGRATED MANAGEMENT SYSTEM MANUAL (ISO:
9001, 14001:2015 &50001:2018)**

DR.K.L.TANDEKAR – PRINCIPAL

COLLEGEDGG@GMAIL.COM

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DISTRIBUTION AND AMENDMENT SHEET						
S.NO.	Revision/Issue No.	Section/ Page No	Details of amendments	Date of change	Amendment by	Remarks

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1.0 SCOPE

Scope of the College:- “PROVISION FOR QUALITY ASSURANCE IN HIGHER EDUCATION, ARTS, SCIENCE AND COMMERCE.”

Non applicability of clauses (If any with justification): NIL

College Profile

This college was established in 1964 as a privately managed institution with Arts & Commerce faculties teaching degree courses. In 1973 it was taken over by the then M. P. government. Despite being situated in an educationally backward area, the College continued its progress. In 1981 PG level teaching in Commerce and Pol. Sc. was started. The faculty of Science came into existence in 1983. Between 1987 and 2003 PG level teaching in five subjects, i.e., Geography, History, Economics, Hindi Literature and Mathematics was started. Computer Application Course as an additional subject in Commerce has been started from the session 2006-07. At present this college is Research Centre for Ph.D. in Pol. Sc, and Commerce. In 2008 the Dept. of Higher Education, Govt. of Chhattisgarh declared this college as a Post Graduate college.

Mission

To advance the quality of teaching in order to produce world class personalities with an ability to adapt to the intellectually challenging environment. To emerge as a centre of excellence and eminence by imparting futuristic education in keeping with global standards, making our students competent and ethically strong so that they can readily contribute to the rapid advancement of society and mankind. To impart educational and moral values in its students and to bring about better co-existence of a human being and universe.

Vision

The vision of the College is to impart meaningful learning process to its students. To enable this vision, College has been engaged in relentless pursuit of imbibing educational and social values in its students .The College looks forward to excel in the educational and various other related fields to educate and train its students to become a better person.

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Objectives

To provide sufficient opportunity for women in higher education by government. To provide sufficient opportunity for all round development of women. To provide social awareness among women To develop humanity among women To prepare women candidate as standard citizen of our society.

0.4 APPROVAL

The Integrated Management System defines various processes & activities carried out in GOVT. NEHRU PG COLLEGE to ensure the uninterrupted system. It contains cross-references to other relevant documents or those of external origin used by the System.

This manual has been aligned with the requirements of ISO 9001:2015, ISO 14001:2015 & ISO 50001:2018 international standards; all applicable statutory Regulatory requirements are GOVT. NEHRU PG COLLEGE mission and policies. All the authorized persons are required to ensure compliance to its requirements.

This Integrated Management System Manual is hereby approved & issued to all authorized holders: -

Prepared By:

IMS LEADER

Date 10.08.21

Approved By

Principal

Date 13.08.21

0.5 COURSES OFFERED BY COLLEGE

- B.A
- B.Sc.
- B.Com
- Computer Application (additional subject in B.Com)
- M.A. (HINDI LITERATURE)
- M.A. (GEOGRAPHY)
- M.A. (POL.Sc.)
- M.A. (HISTORY)
- M.A. (ECONOMICS)

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- M.COM
- M.Sc (MATHEMATICS)
- PGDCA
- M.A. (ENGLISH)
- M.Sc (ZOOLOGY)
- CERTIFICATE COURSE IN ENGLISH TRANSLATION

DEPARTMENTS

- ENGLISH
- HINDI
- GEOGRAPHY
- POL. SC.
- HISTORY
- ECONOMICS
- HOME SCIENCE
- COMMERCE
- PHYSICS
- CHEMISTRY
- MATHEMATICS
- ZOOLOGY
- BOTANY

Research

The Research culture has been fostered in the institution, with constant encouragement to teachers and the students to indulge into research activities. Department of Commerce & proposal has been sent for the department of Political Science, Economics and History. Some of the departments of science are in pipeline for the same as the science stream has recently shifted to the present campus and the labs are being established with the same purpose. Registered Research Supervisors are **05** in all, including the Principal of the institution. About **10** research scholars have been already awarded their Ph.D. The faculty members try to get their Research papers & Review articles published in reputed Journals; and during the last 5 years the total number of publications has reached up to **114**,. 1 Book is published by the principal of the institute.

Activities:

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0.6 Distribution List

S. NO	COPY HOLDER	COPY
1.	Principal	Master Copy
2.	IMS Leader	Controlled Copy
3.	HODs	Controlled Copy
4.	Certifying Body	Controlled Copy

STRUCTURE OF THE MANUAL

This Integrated Management System Manual is structured as shown in the content section of the Manual. Different sections of the Integrated Management System Manual are arranged sequentially as per section numbers and correlated with the clause numbers of ISO 9001:2015, ISO 14001:2015 And ISO 50001:2018 standards.

The current issue number and amendment no. is given on each page. Issue no. 01 has been given to first issue of this manual. This manual is available in English Language Only. The original Copy bears rubber stamp of "Master Copy" on reverse of each page. All Controlled copies issued to the concerned individual (as per distribution list) are legibly copied from Master Copy and bear rubber stamp "CONTROLLED COPY" in red color on first page of the Manual.

Any additional copies of the Manual, required for external agencies, are issued by the **IMS LEADER** and such copies of the Manual issued are stamped "UNCONTROLLED". These uncontrolled copies neither comes under the purview of document amendment procedure nor used within the WAZIUL ISLAM FARM

MANUAL REVISION, UPDATION AND AMENDMENT PROCEDURE

The **IMS LEADER** to carry out the activities of preparing, issuing, maintaining & updation of this Integrated Management System Manual whereas the approval is done by **PRINCIPAL**

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The distribution of the Manual and the amendment(s) are controlled and this activity is carried out by the **IMS LEADER** .The Integrated Management System Manual is reviewed periodically by the **IMS LEADER in** consultation with the related departments. No revision is implemented unless it has been approved by the PRICIPAL **and** formally issued.

When amendment takes place, the amendments are indicated in each of the amended page(s), and recorded in the Amendment Sheet available in the controlled copies of the Manual. The insertion of the additional/amended sheet(s) and the removal of the old sheet(s) in the individual controlled copies as per the

2.0 Normative References:

The List of references which include Standards, Manuals, Procedures and applicable product Regulatory Requirements used in developing and implementing the systems is given below:

Standards:

ISO 9001:2015 Quality Management System

ISO 14001:2015 Environmental Management System

ISO 50001:2018 Energy Management System

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Statutory and regulatory requirements:

List of Applicable Legal Requirements

Approval of UGC

Approval of AICTE

Certified By NAAC

GOVT. NEHRU PG COLLEGE has identified and full fill the statutory and regulatory requirements as per Central, state and other local government or regulatory requirement in legal register (GNPGC-F 901)

3.0 TERMS AND DEFINITIONS

For the purposes of this document, the terms and definitions given in ISO 9001:2015, ISO 14001:2015& ISO 50001:2018 apply.

3.01 GNPGC

Person or group of people that has its own functions with responsibilities, authorities and relationships to achieve its objectives.

3.02 Interested party

Person or GNPGC that can affect, be affected by, or perceive themselves to be affected by a decision or activity.

3.03 Requirement

Need or expectation that is stated, generally implied or obligatory.

3.04 Management system

Set of interrelated or interacting elements of an GNPGC to establish policies and objectives and processes to achieve those objectives.

3.05 Top management

Person or group of people who directs and controls an GNPGC at the highest level.

3.06 Effectiveness

Extent to which planned activities are realized and planned results achieved.

3.07 IMS Policy

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Intentions and direction of an GNPGC, as formally expressed by its top management.

3.08 Objective

Result to be achieved.

3.09 Risk

Effect of uncertainty on an expected result.

3.10 Competence

Ability to apply knowledge and skills to achieve intended results.

3.11 Documented Information

Information required be controlling and maintaining by an GNPGC and the medium on which it is contained.

3.12 Process

Set of interrelated or interacting activities which transform inputs into outputs.

3.13 Performance

Measurable result.

3.14 Outsource Make an arrangement where an external GNPGC performs part of an GNPGC's function or process.

3.15 Monitoring

Determining the status of a system, a process or an activity.

3.16 Measurement

Process to determine a value.

3.17 Audit

Systematic and independent process for obtaining objective evidence and evaluating it objectively to determine the extent to which the audit criteria are fulfilled.

3.18 Conformity

Fulfillment of a requirement.

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3.19 Nonconformity

Non-fulfillment of a requirement.

3.20 Corrective Action

Action to eliminate the cause of nonconformity and to prevent recurrence.

3.21 Continual Improvement

Recurring activity to enhance performance.

3.22 Correction

Action to eliminate a detected nonconformity.

3.23 Involvement

Engagement in, and contribution to, shared objectives.

3.24 Context of the GNPGC

Business IMS combination of internal and external factors and conditions that can have an effect on an GNPGC's approach to its products, services and investments and interested parties.

3.25 Function

Role to be carried out by a designated unit of the GNPGC.

3.26 Customer

Person or GNPGC that could or does not receive a product or a service is intended for or required by this person or GNPGC.

3.27 External provider

Person or GNPGC that provides a product or a service.

3.28 Improvement

Any activity to enhance performance.

3.29 Management

Coordinated activities to direct and control an GNPGC.

3.30 Quality Management

Management with regard to quality.

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3.31 System

Set of interrelated or interacting elements.

3.32 Infrastructure

System of facilities, equipment and services needed for the operation of an GNPGC Integrated Management System with regard to quality/IMS

3.33 IMS Policy.

Policy related to IMS

3.34 Quality Policy

Policy related to quality.

3.35 Strategy

Planned activities to achieve an objective.

3.36 Object

Entity anything perceivable or conceivable.

3.37 Quality

Degree to which a set of inherent characteristics of an object fulfils requirements.

3.38 Statutory Requirement

Obligatory requirement specified by a legislative body.

3.39 Regulatory Requirement

Obligatory requirement specified by an authority mandated by a legislative body.

3.40 Defect

Nonconformity related to an intended or specified use.

3.41 Traceability

Ability to trace the history, application or location of an object.

3.42 Innovation

Process resulting in a new or substantially changed object.

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3.43 Contract

Binding agreement.

3.45 Quality Objective

Objective related to quality.

3.46 Output

Result of a process.

3.47 Product

Output that is a result of activities where none of them necessarily is performed at the interface between the provider and the Customer.

3.48 Service

Intangible output that is the result of at least one activity necessarily performed at the interface between the provider and the Customer.

3.49 Data

Facts about an object.

3.50 Information

Meaningful Data.

3.51 Objective Evidence

Data supporting the existence or verity of something.

3.52 Information system

Network of communication channels used within an GNP GC.

3.53 Knowledge

Available collection of information being a justified belief and having a high certainty to be true.

3.54 Verification

Confirmation, through the provision of objective evidence that specified requirements have been fulfilled.

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3.55 Validation

Confirmation, through the provision of objective evidence, that the requirements for a specific intended use or application have been fulfilled.

3.56 Feedback

Opinions, comments and expressions of interest in a product, a service or a complaints-handling process.

3.57 Customer Satisfaction

Customer's perception of the degree to which the Customer's expectations have been fulfilled.

3.58 Complaint

Customer satisfaction expression of dissatisfaction made to an GNP GC related to its product or service or the complaints-handling process itself, where a response or resolution is explicitly or implicitly expected.

3.59 Audit program

Set of one or more audits planned for a specific time frame and directed towards a specific purpose.

3.60 Audit criteria

Set of policies, documented information or requirements used as a reference against which audit evidence is compared.

3.61 Objective / Audit Evidence

Records, statements of fact or other information, which are relevant to the audit criteria and verifiable.

3.62 Audit findings

Results of the evaluation of the collected audit evidence against audit criteria.

3.63 Concession

Permission to use or release a product or service that does not conform to specified requirements.

3.64 Release

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Permission to proceed to the next stage of a process.

3.65 Characteristic

Distinguishing feature

3.66 Performance Indicator

Performance metric

3.67 IMS Management

Management with regard to IMS.

3.68 IMS Objective

Objective related to IMS.

3.69 IMS

Element of an GNPGC's activities or products or services that interacts or can interact with the IMS .

3.70 IMS Condition

State or characteristics of the IMS as a determined at a certain point in time.

3.71 IMS Impact

Change to the IMS whether adverse or beneficial wholly partially resulting from an GNPGC IMS aspects.

3.72 Prevention of pollution

Use of processes practices techniques materials products services or energy to avoid reduce or control (separately or in combination) the creation emission or discharge of any type of pollutant or waste, in order to reduce adverse IMS impacts.

3.72 Compliance Obligations

Legal requirements that an GNPGC has to comply with another requirement that an GNPGC has to or choose to comply with.

3.73 Life Cycle

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Consecutive and interlinked stages of a product (or services) system, from raw material acquisition or generation from natural resources to final disposal.

3.74 Contractor

A person(s) or any non-GOVT. NEHRU PG COLLEGE Entity that has contracted with GNPGC to supply manpower, services.

3.75 Contract Employee(S)

Any person(s) who is employed by contractors to carry out the contracted work. He is not employed directly Govt. Nehru PG College

3.76 College

College means all the technical & professional services & responsibilities to be performed by Govt. Nehru PG College as specified, stated, indicated in the Syllabus. .

3.77 Accident An unplanned or undesired event which can result harm to people, property or the IMS

3.78 Incident Event that results into an accident or have the potential to lead to an accident. The term Incident includes —Near Missesll.

3.79 Near Miss a Near Miss is an event where no contact or exchange of energy occurred and thus did not result in personal injury, asset loss or damage to the IMS .

3.80 Hazard

A Source or situation with a potential for harm in terms of human injury or ill health, damage to property, damage to the work place IMS or a combination of these.

3.81 Risk

A measure of the likelihood that the harm from a particular hazard will occur, taking into account the possible severity of the harm.

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3.82 Unsafe Act Or Condition Any act or condition that deviates from a generally recognized safe way or specified Method of doing a job and thus increases the potential for an accident.

3.83 Personal Protective Equipment (PPE) All equipment and clothing intended to be utilized, which affords protection against one or more risks to health and safety. This includes protection against adverse weather conditions

3.84 MSDS Material Safety Data Sheet: Mandatory information that must Govt. Nehru PG College almost every chemical in the workplace except for items like cleaning supplies. MSDS includes details such as the risks, precautions and first aid procedures associated with the chemical

3.85 Energy management team

Person with responsibility and authority for effective implementation of an energy management system (3.2.2) and for delivering energy performance improvement (3.4.6).

Note 1 to entry: The size and nature of an GNP GC (3.1.1) and available resources are taken into account when determining the size of an energy management team. A single person can perform the role of the team

3.86 energy performance

Measurable result(s) related to energy efficiency (3.5.3), energy use (3.5.4) and energy consumption (3.5.2)

3.87 Energy performance indicator (EnPI)

Measure or unit of energy performance (3.4.3), as defined by the GNP GC (3.1.1)

3.4.5 Energy performance indicator value (EnPI value)

Quantification of the EnPI (3.4.4) at a point in or over a specified period of time **3.88 Energy performance improvement**

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Improvement in measurable results of energy efficiency (3.5.3), or energy consumption (3.5.2) related to energy use (3.5.4), compared to the energy baseline (3.4.7)

3.89 energy baseline (EnB)

Quantitative reference(s) providing a basis for comparison of energy performance (3.4.3)

3.90 static factors

Identified factor that significantly impacts energy performance (3.4.3) and does not routinely change

3.91 relevant variable

Quantifiable factor that significantly impacts energy performance (3.4.3) and routinely changes

3.4.10 normalization

Modification of data to account for changes to enable comparison of energy performance (3.4.3) under equivalent conditions

GROSSARY AND ABBREVIATION:

S.NO	ABBREVIATION	DESCRIPTION
1	GNPGC	GOVT. NEHRU PG COLLEGE
2	IMS	INTIGRATED MANAGEMENT SYSTEM
3	QMS	(QUALITY, ENVIORNMENT & ENERGY MANAGEMENT SYSTEM) QUALITY MANAGEMENT SYSTEM
4	EMS	ENVIORNMENTAL MANAGEWMENT SYSTEM
5	OHSMS	OCCUPATIONAL HEALTH AND SAFETY MANAGEMENT SYSTEM
6	EnMS	ENERGY MANAGEMENT SYSTEM
7	BP	BUSSINESS PROCESS
8	OC	ORGANISATION CHART
9	QF	QUALITY FORMAT
10	IA	INTERNAL AUDIT
11	MRM	MANAGEMENT REVIEW MEETING
12	NC	NON CORFORMANCE
13	CA	CORRECTIVE ACTION
.14	PA	PREVANTIVE ACTION

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15	NCP	NON CONFORMING PRODUCT
16	NCR	NON CONFORMANCE REPORT
17	EP	EXTERNAL PROVIDER
18	R &A	RESPONSIBILITY AND AUTHORITY
19	IQA	INTERNAL QUALITY AUDIT
20	HR	HUMAN RESOURCE

4. CONTEXT OF THE ORGANISATION

4.1 UNDERSTANDING THE ORGANISATION AND ITS CONTEXTS:

The GNPGC has determined the external and internal issues that are relevant to its purpose and that affect its ability to achieve the intended outcomes of its Integrated Management System; the GNPGC has defined the internal and external issues.

The internal and external issues has determined by the key personals of the GNPGC

The GNPGC has also considered IMS condition and personal safety being affected by or capable of affecting GNPGC.

The GNPGC has monitored and reviewed information about these external and internal issues in Management Review Meeting at a defined interval.

INTERNAL ISSUES.

ORGANISATION CONTEXT (INTERNAL)

S. No.	Issues	Status	Positive	Negative	Recommend ation Action
1	Competence	Top Level Management is competent	Positive	—	Risk analysis
		Middle Level Management is competent	Positive	-	-
2	Space	Skilled /unskilled trained Employees	Positive	-	-
		Adequate space	Positive	-	Risk analysis
3	Values	Defined and implemented	Positive	—	Risk analysis

4	Culture	Good	Positive	—	Risk analysis
5	Tools and	Adequate and state	Positive	-	- Risk
	Equipment	of art technology			analysis
6	Employees	Safety committee	Positive	-	Risk analysis
	Harassment	team is monitor all			
		employees issues			
		Management			
7	Energy	Program/Monitoring	Positive	-	Risk analysis
	usage/Consumption	Records			

**ORGANISATION
CONTEXT**

(EXTERNAL)

S. No.	Factor	Status	Positive	Negative	Recommend ation Action
1	Legal	Defined Local laws (statutory, regulatory other requirement) Medical laboratory norms	Positive	—	Risk analysis and reviewed at defined frequency
2	Customer	Defined	Positive	-	Risk

		Specification			analysis
3	Reputation in market	High reputation	Positive	-	Risk analysis
4	Media	Failing in advertising through media is threat But College is advertising themselves positively	Positive	-	Risk analysis
5	External Communications	Interaction with Customer s/ legal authority	Positive	-	Risk analysis
6	Technology	New and advanced technology is used by GNPGC	Positive	-	Risk analysis

Document reference:

- ☐ Management Review Meeting. GNPGC-F501

Responsibility:

- ☐ Top management

4.2 UNDERSTANDING THE NEED AND EXPECTATION OF EMPLOYEES AND INTERESTED PARTIES

The GNPGC has determined:

- ☐ The interested parties in addition to the Employees that are relevant to the Integrated Management System ; Relevant

need and expectations (requirement) of these interested parties and Employees ;

- Need and expectation become its compliance obligations (legal and other requirement)

GNPGC has defined the need and expectation of the Employees and interested parties refer in below section and reviewed and monitor during the management review meeting

Document reference:

- Management Review Meeting GNPGC-F501

Responsibility:

- Top management
- IMS LEADER

NEED AND EXPECTATION OF INTRESTED PARTIES AND EMPLOYEES

INTRESTED PARTIES		RELIVANTIMS NEED AND EXPECTATION	COMPLIANCE OBLIGATION
Stakeholder/owner		Sustainable business/business continuity/maximize shareholder value, brand management, compliance with legal, contractual and Customer requirement	Identify and manage risk and opportunities
Corporate		May have specific IMS or regulatory requirement Centralized procurement program	Comply with corporate IMS and regulatory requirement; comply with mandated contracting requirement and purchasing agreement.
Employees		Safe air , water quality and	OHSA indoor air and
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	notice level , work safety , Pride in GNPGC Timely growth	noise regulation EPA clean water Act
Workers	Good Health, safe Enviornment and timely payment	Medical and E.S.I &P.F
Customer	Good Quality and timely delivery of product	As per P.O
Neighbor/community	No dusting Enviornment or air pollution, and safe and healthy environment confined space.	Boundary around the confined space, mining below the 20 ft from ground level .
Local /county /other legal Regulator	Complies with city/country	Applicable city ordinance.

4.3 DETERMINING THE SCOPE OF THE INTEGRATED MANAGEMENT SYSTEM

Scope of college is

“PROVISION FOR QUALITY ASSURANCE IN HIGHER EDUCATION, ARTS, SCIENCE AND COMMERCE.”

The GNPGC has determined the boundaries and applicability of the IMS Management system to establish its scope;

During determining this scope, GNPGC has considered:

- The external and internal issues referred to in Section no. **4.1**
Take into account the requirement and Compliance obligation referred to in Section no 4.2

- ☐ GNPGC unit, function and physical boundaries and also Take into account the planned or performed work –related activities.
- ☐ Its activities, product and services **(14001:2015)**
- ☐ Its authority and ability to exercise control and influence **(14001:2015)**

The Integrated Management System has included the activities, product and services within the GNPGC control or influence that can impact the GNPGC's IMS performance.

Document reference: Refer section no. 01 of this manual.

Responsibility:

Top management

- ☐ IMS LEADER

4.4 INTEGRATED MANAGEMENT SYSTEM

The GNPGC has established, implement, maintained and continually improve an INTEGRATED MANAGEMENT SYSTEM included process needed and their interaction in accordance with IMS **(ISO 9001:2015 , ISO 14001:2015 & ISO 50001:2018)** standard requirement.

Responsibility:

- ☐ Top management
- ☐ IMS LEADER

5.1 LEADERSHIP AND COMMITMENT:

Top management has demonstrated leadership and commitment with respect to the Integrated Management System by:

- ☐ Taking overall responsibility and accountability of IMS management system and for the prevention of work – related injury and ill health as well as the provision of safe and healthy work places and activities **refer in Annex-IV Roles and responsibility**
- ☐ Ensuring that the IMS Policy and IMS Objective are established and are

compatible with the strategic direction and context of GNPGC **refer in section 5.2 IMS Policy & in section 6.2 IMS Objective**

- ☐ Ensuring the integration of IMS requirement into the GNPGC business process.
- ☐ Ensuring the resources needed to establish, implement, maintain and improve the Integrated Management System.
- ☐ Communicating the importance of effectiveness of the Integrated Management System and of conforming to the IMS management system requirement
- ☐ Ensuring that Integrated Management System achieves its intended outcomes.
- ☐ Directing and supporting persons to contribute to the effectiveness of the Integrated Management System.
- ☐ Ensuring action plan are approved and implemented **(ISO 50001:2018)**
- ☐ Ensuring resources are needed are available **(ISO 50001:2018)**
- ☐ Ensuring the formation of IMS Team (EnMS Team) **(ISO 50001:2018)**
- ☐ Communication the importance of effective energy management and conforming to IMS Requirement. **(ISO 50001:2018)**
- ☐ Ensuring and promoting continual improvement.
- ☐ Supporting, other relevant management roles to demonstrate their leadership as it applies to their area of responsibility.

5.2 IMS POLICY

Top management has established implemented and, maintained IMS policy with in the defined scope of its IMS systems are:

- ☐ Is appropriate to the purpose and context of GNPGC and supports its strategic direction.
- ☐ Includes a commitment to provide safe and healthy working condition for prevention of work –related injury and ill health

and Is appropriate to the purpose ,size and context of the GNP GC and to the specific nature of its IMS risk ,IMS opportunities, and the nature, scale and IMS impact of its activities, product and services;

- ☐ Provide a framework for setting IMS objectives and energy targets
- ☐ Include a commitment to ensure the availability of information and necessary resources to achieve objective and energy target;
- ☐ Including a commitment to the protection of the IMS, including prevention of the pollution and fulfillment of legal requirement and other requirement and specific commitment relevant to the context of GNP GC and related to energy efficiency, energy use and energy consumption.
- ☐ Include a commitment to fulfill its compliance obligation.
- ☐ Include commitment to eliminate hazard and reduce IMS risk (see 8.1.2)
- ☐ Include a commitment to continual improvement of the Integrated Management System to enhance IMS Performance and of energy performance
- ☐ Support design activities that consider energy performance improvement.
- ☐ Include a commitment to satisfy applicable requirements
- ☐ Include a commitment to consultation and participation of employees , and where they exist, employees 's representative

The IMS policy has:

- ☐ Documented in section no 5.2 of manual.
- ☐ Communicated with in the GNP GC through display,training and digital media source
- ☐ Available to all interested parties through website and catalogs/brochures
- ☐ Reviewed and updated at a defined frequency during MRM.

Responsibility:

- ☐ Top management
- ☐ IMS LEADER

(ISO 9001:2015, ISO 14001:2015 & ISO 50001:2018

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QUALITY, ENVIRONMENT, HEALTH AND SAFETY POLICY

GOVT. NEHRU PG COLLEGE will be the Leader teaching and learning activities in India by adopting best technology available across the globe and incorporating the IMS system. GNPGC is aware of its duties and responsibilities towards the quality of products and services on system design, Preserving environment, eliminating or reducing hazard to provide safety and health of our employees/workers and Interested Parties who are associated with us along with a consultation and participation. We are committed to continually improve our integrated management system by complying with all applicable statutory, legislative and regulatory requirements. It will be reviewed at periodic interval for its suitability

Approved by Principal**Date: 13/08/2021**

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ENERGY POLICY (EnMS)

We at GNPGC are committed to sustainable development in all its activities and processes. To accomplish this, we will make efforts to reduce energy cost. Our endeavor towards this goal will be as follows:

- ☐ **to reduce overall energy use and consumption by identifying and implementing energy conservation scheme in the processes, innovation and incorporating new energy efficient technologies & equipment;**
- ☐ **committed to continual improvement in energy performance and to ensure the availability of information and of necessary resources to achieve objectives and targets;**
- ☐ **committed to comply with applicable legal requirements and other requirements to which the BMF subscribes related to its energy use, consumption and efficiency;**
- ☐ **provides the framework for setting and reviewing energy objectives and targets and supports the purchase of energy-efficient products and services, and design for energy performance improvement;**
- ☐ **Policy is documented and communicated to all the Interested parties and is regularly reviewed, and updated as necessary.**

Approved by Principal**Date: 13/08/2021****5.3 GNPGC roles, responsibilities and authorities**

Top management has ensured assigned the responsibilities and authorities for all within the GNPGC and communicated at all levels through **GNPGC chart, and roles, responsibility and authority matrix** and maintained in annexure **II (GNPGC chart)** and **Annexure IV roles, responsibility and authority matrix)**

Employees at each level of the GNPGC has responsibility as aspects of the Integrated Management System over which they have control.

Top management appointed has appointed **IMS Team** and **(IMS LEADER) is appointed as a Safety leader.** Team has a responsibility to conform Integrated Management System meet the requirements of standard and reporting to top Management on the performance of the Integrated Management System

Document ref:

- ☐ Annexure II (GNPGC chart)
- ☐ Annexure IV (roles, responsibility and authority matrix)

Responsibility:

- ☐ Top management
- ☐ IMS LEADER
- ☐ All Employees

6.1 Actions to address risks and opportunities

6.1.1 When planning for the Integrated Management System , the GNPGC has considered issues referred in **4.1 (context)**, requirement referred in **4.2(interested parties)** and **4.3 (the scope of its Integrated Management System)** and determined risk and opportunities that needed to be addressed to

- ☐ Give assure that the Integrated Management System can achieve its intended result(s)
- ☐ Enhance desirable effects
- ☐ Prevent, or reduce undesired effects
- ☐ Achieve continual improvement
- ☐ The scope of its IMS management IMS System

During determining the risk and opportunities for Integrated Management System and its intended outcomes that need to be addressed, GNPGC has taken in account:

- ☐ Hazards (6.1.2.1)
- ☐ IMS risk (6.1.2.2)
- ☐ IMS opportunities and other opportunities (6.1.2.3)
- ☐ Legal requirement and other requirement (6.1.3)

The GNPGC has determined the risk and opportunities that are relevant to intended outcomes of the Integrated Management System , in case of planned change, permanent or temporary, assessment has undertaken before the change is implemented (8.1.3) The GNPGC has maintained documented information on:

- ☐ Risk and opportunities
- ☐ Process and action needed to determine and address its risk and opportunities to the extent necessary to have confidence that they are carried out as a planned.
- ☐ The risk and opportunities are determined are through the Severity factor and probability factor

Probability Factor

Probability	Low	Medium	High
Factor Score	1	2	3

Severity Factor

Severity	Negligible	Marginal	Critical	Catastrophic
Factor Score	1	2	3	4

- ☐ Risk level (Probability factor X severity Factor) :
- ☐ High: rating is 8-12 action required
- ☐ Medium: rating is 4-7 supported by additional process
- ☐ Low : rating is 1-3 No action required

Risk Factors

Issues (Internal / External)	Expected Result	Uncertainty	severity	Probability	Total rating	Risk (H/M/L)	Opportunity	Control Point(s)
	Work	Existing	2	3	6	M	Opportunity	Provide

Competence	Force is competent	workforce not skilled					Ability to hire Skilled Team	training to existing employees
Space	Adequate space is provided	Space provided may not adequate	2	2	4	L	New Establishment	Acquire more space
Culture	Work Force is motivated	Unacceptable quality of work	2	2	4	L	Opportunity for managers to lead	To build strong organization culture
Equipment	equipment are usable	These may not work properly	2	3	6	M	Timely Maintenance	Timely maintenance of equipment
Legal/Regulatory Authority	Applicable requirements to be followed	Legal requirements not reviewed	3	3	9	H	Timely Review And Update	Identify and follow applicable legal

d
timely

require
m
ents and
update

6.1.1. Assessment of IMS opportunities and other opportunities for the Integrated Management System

The GNPGC hasl establish, implement and maintain a process(es) to assess

a) : IMS opportunities to enhance IMS performance, while taking into account planned changes to the GNPGC, its policies, its processes or its activities and:

1) Opportunities to adapt work, work GNPGC and work environment to Employees;

2) Opportunities to eliminate hazards and reduce IMS risks;

b) Other opportunities for improving the Integrated Management System

6.1.2 IMS aspects (14001:2015)

Within the defined scope of the Integrated Management System , the GNPGC determines the IMS aspects of its activities and services that it can control and those that it can influence, and their associated IMS impacts, considering a life cycle perspective.

When determining IMS aspects, the GNPGC takes following in account:

- a) Change in existing testing technique /norms
- b) Abnormal conditions or emergency situation

The GNPGC determines those aspects that have or can have a significant IMS impact through defined criteria. These significant aspects are informed to all within the GNPGC.

Significant IMS aspects can result in risks and opportunities associated with either adverse IMS impacts (threats) or beneficial IMS impacts (opportunities). The GNPGC identified the controls proportionate to the potential impact on the conformity of products,

services and processes that address these risks and opportunities; and evaluates the effectiveness of these actions.

Options to address risks/aspect can include

- a) Impact of the identified risks/opportunities and aspects
- b) Taking risk in order to pursue an opportunity,
- c) eliminating/control the risk/aspect source,
- d) Changing the likelihood or consequences,
- e) Sharing the risk,
- f) Retaining risk by informed decision.

Opportunities can lead to the

- a) Adoption of new technology,
- b) Increase in performance reliability
- c) Using new technology and other desirable and viable possibilities to address the GNPGC's or its Customer s' needs.

Document ref:

Annexure V

Responsibility:

- ☐ Top management
- ☐ IMS LEADER
- ☐ IMS Team

6.1.3 Compliance obligations and determination of legal and other requirement

The GNPGC has established, implement and maintained a process to:

- a) Determine and have access to the compliance obligations/up to date legal requirement and other requirement related to its hazards, IMS risk and Integrated Management System .
- b) Determined these compliance obligations/ legal requirement and other requirement apply to the GNPGC and communicated ,
- c) Take this compliance obligations/up to date legal requirement and other requirement into account when establishing, implementing, maintaining and continually improving its Integrated Management System

The GNPGC has maintained and retains documented information of its compliance obligations/ legal requirement and other requirement and updated if change required.

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- ☐ Legal Review register
- ☐ NOCs

6.1.4 Planning action

The GNPGC plans:

a) to take actions to address its:

1) Significant IMS aspects;

2) Compliance obligations/legal and other requirement; Risk and opportunities

Prepare and respond to emergency situation

Roles and responsibility is defined during and planning and review and evaluate at a defined frequency in MRM.

Reference Documents:

- ☐ Risk Analysis
- ☐ Aspect & Impact
- ☐ Emergency preparedness and response

Responsibility:

- ☐ Top management
- ☐ IMS LEADER
- ☐ IMS Team

6.2 IMS objectives and planning to achieve them

6.2.1 The GNPGC has established IMS Objectives at relevant functions, levels and processes needed for the IMS Management System.

The objectives are:

a) In line with the IMS Policy

b) Measurable

c) Take into account

□ Applicable requirements

□ Result of the assessment of the risk and opportunities

□ Result of the consultation with Employees and where they exist employee's representative.

d) Monitored at defined frequency

e) Communicated to the team

f) Updated From Time To Time

OBJECTIVE:

1. **HR:** To Provide Awareness Training to All Employees in Every Three Months related to IMS.
2. **COMPLAINT :** To Reduce students Complaint max 2 in a quarter
3. **LEGAL :** 100% legal compliance
4. **Electrical Energy:** Reduce Electrical energy consumption upto 3 % from previous year.
5. **Paper:** minimize the consumption of paper upto 10% per year
6. **Personal Safety:** Zero illness for interested parties along with workers
7. **Energy:** Reduce the overall consumption of energy 3% as compared to previous Year

6.2.2 Planning to achieve IMS Objectives, GNP GC ensures to determine the following for achievement of objectives:

- a) What will be done;
- b) What resources will be required;
- c) Who will be responsible;
- d) When it will be completed;

- e) How the results will be evaluated.
- f) How the action to achieve IMS objective will integrate into the GNPGC business process.

Reference document:

- ☐ Objective Monitoring Sheet
- ☐ Management programs
- ☐ MRM Minutes

6.3 Energy review (EnMS)

GNPGC develop and conduct an energy review.

To develop the energy review, GNPGC is:

a)analyse energy use and consumption based on measurement and other data, i.e.:

- 1)Identifying current types of energy
- 2)evaluating past and current energy use(s) and consumption; b) based on the analysis, identify SEUs

c) for each SEU:

- 1)determining relevant variables;
- 2)Determining current energy performance;
- 3)identifying the person(s) doing work under its control that influence or affect the SEUs;

d)determining and prioritize opportunities for improving energy performance;

e)estimating future energy use(s) and energy consumption.

The energy review updated at defined intervals, as well as in response to major changes in facilities, equipment, systems or energy-using processes.

GNPGC maintain as documented information (see 7.5) the methods and criteria used to develop the energy review, and retain documented information of its results.

Ref: Identification and review of energy saving

opportunities En-P-01

6.4 Energy Performance Indicators (EnMS)

GNPGC determined EnPIs that:

- a) are appropriate for measuring and monitoring its energy performance;
 - b) enable the GNPGC to demonstrate energy performance improvement.
- The method for determining and updating the EnPI(s) is maintained as documented information. Where GNPGC has data indicating that relevant variables significantly affect energy performance, GNPGC consider such data to establish appropriate EnPI(s).

EnPI value(s) is reviewed and compared to their respective EnB(s), as appropriate. GNPGC retain documented information of EnPI value(s).

6.5 Energy Baseline (EnMS)

GNPGC has established Energy Baseline (EnB) using the information from the energy reviews, taking into account a suitable period of time.

Where GNPGC has data indicating that relevant variables significantly affect energy performance, the GNPGC is carrying out normalization of the EnPI value and corresponding EnB.

EnB will be revised in the case of one or more of the following:

- a) EnPI(s) no longer reflect the GNPGC 's energy performance;
- b) there have been major changes to the static factors;
- c) According to a pre-determined method.

6.6 Planning for collection of energy data (EnMS)

GNPGC ensured that key characteristics of its operations affecting energy performance are identified, measured, monitored and analysed at planned intervals (see 9.1). GNPGC define and

implement an energy data collection plan appropriate to its size, its complexity, its resources and its measurement and monitoring equipment. The plan specify the data necessary to monitor the key characteristics and state how and at what frequency the data is be collected and retained.

Data is collected (or acquired by measurement as applicable) and retained documented information is included:

- a) the relevant variables for SEUs;
 - b) energy consumption related to SEUs and to GNPGC ;
 - c) operational criteria related to SEUs;
 - d) static factors, if applicable;
 - e) data specified in action plans.
- The energy data collection plan is reviewed at defined intervals and updated as appropriate

GNPGC ensured that the equipment used for measurement of key characteristics provides data which are accurate and repeatable. GNPGC retain documented information on measurement, monitoring and other means of establishing accuracy and repeatability.

7.1 Resources

The GNPGC has determined and provided the resources needed for the establishment, implementation, maintenance and continual improvement of Integrated Management System

Reference documents:

- List of equipment's

7.2 Competence

The College has:

- a) Determined the necessary competence of employees through skill evaluation of person(s) doing work under its control that affects the performance and effectiveness of the Integrated Management System and its effect in energy Performance

- b) Ensured that these persons are competent on the basis of appropriate education, training, or experience.
- c) Identified the training needs and types of training.
- d) Provision of training.
- e) Evaluated the training effectiveness.
- f) Appropriate evidence/records of above are maintained.

Reference Documents:

- ☐ Employees' records
- ☐ Training records
- ☐ Competence records

7.3 Awareness

The GNPGC ensures that persons doing work under the GNPGC's control are aware of:

- a) The IMS policy & relevant IMS Objectives
- b) Their contribution to the effectiveness of the IMS Management System, including the benefits of improved performance
- c) The implications and potential consequences of not conforming to the IMS requirements
- d) Incident and the other outcomes of investigations that are relevant to them
- e) Hazards, IMS risk and action determined that are relevant to them.
- f) The ability to remove themselves from work situation that they consider present imminent and serious danger to their life or health, as well as the arrangements for protecting them from undue consequences for doing so

The awareness Methods includes the following:-

- a) Ongoing Training system
- b) Involvement of people during the planning and periodic review
- c) Information available during work done

Reference Documents:

- Training Record

. 7.4 Communication

The GNPGC must decide what, when, with whom and how to communicate both internally and externally. Problems may arise due to incomplete, ambiguous or inaccurate information being transmitted; transmission to the wrong person, too late or at the wrong time; use of inappropriate or unreliable media, etc.

Communication by the **IMS LEADER** on the effectiveness of the IMS must not only take place at the top management level but also at appropriate levels within the GNPGC. All process owners as well as their personnel receive periodic feedback on their areas of responsibility.

The GNPGC has a defined system for external or internal communication. Following communication channels as Annexure 7.4 (Internal and external communication) are used:-

What	When	with whom	How	Who
INTERNAL COMMUNICATION				
		All Employees	Display /	

IMS policy	Permanent	/	Letter /	Manag e ment
		Intereste d parties	Training	
Importanc e Of	As per Training plan / during			
effective IMS	Orientation Training	All Employee s	Training / Display	Manag e ment
Responsibi li Ties	During recruitment / Promotion /		Procedure / Oral /	
		Employee		Manag e

7.5 Documented Information

7.5.1 General

The Integrated Management System includes:

- Documented information required by ISO 9001:2015 , ISO 14001:2015 & ISO 50001:2018 Standard;
- Documented information determined by the GNPGC as being necessary for the effectiveness of the identified processes of IMS

Documented information needed to be maintained for the purposes of establishing a Quality includes:

- Scope of the Integrated Management System
- Documented information necessary to support the operation of processes
- IMS policy
- IMS objectives

7.5.2 Creating and updating

When creating and updating documented information, it is ensured that:

- a) Identification and description of documented information is adequate. This includes the following:-
 - Document Title
 - Document Unique Reference No. S
 - Issue No. & Date
 - Revision No. & Date
 - Review & approval authority
- b) Format and media used to keep these documented information.
- c) Review and approval of documented information before release by competent authority.
- d) Review and approval is traceable, i.e. it must be clear who performed it.

7.5.3 Control of documented information

7.5.3.1 Documented information required by the Integrated Management System and by IMS Standard is controlled to ensure that:

- a) It is available and suitable for use, where and when it is needed
- b) It is adequately protected (e.g. from loss of confidentiality, improper use, or loss of integrity).

7.5.3.2 For the control of documented information, following system is developed:

- a) Availability
- b) Storage
- c) Preservation
- d) Distribution
- e) Protection
- f) Disposition
- g) Change control
- h) Retention
- i) Documented information of external origin determined by the GNP GC to be necessary for the planning and operation of the Quality is identified as appropriate, and controlled.

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- j) Documented information retained as evidence of conformity is protected from unintended alterations.

Reference Documents:

- ☐ Master List of Documents and Records

Responsibility:- Top management, IMS Leader

8.1 Operational planning and control**8.1.1 General:**

The GNPGC has planned, implement, control and maintain the processes needed to meet requirements of the Integrated Management System, and to implement the actions determined in Clause 6, by:

- a) Establishing criteria for the processes;
- b) Implementing control of the processes in accordance with the criteria;

The GNPGC has ensured that outsourced processes are controlled or influenced. The type and extent of control or influence to be applied to the process (es) has defined within the Integrated Management System.

Consistent with a life cycle perspective, the GNPGC has :

- ☐ establish controls, as appropriate, to ensure that its IMS requirement(s) is (are) addressed in the design and development process for the service, considering each life cycle stage;
- ☐ establishing criteria for the processes, including the effective operation and maintenance of facilities, equipment, systems and energy-using processes, where their absence can lead to a significant deviation from intended energy performance;
- ☐ determine its IMS requirement(s) for the procurement of products and services, as appropriate;

- communicate its relevant IMS requirement(s) to external providers, including contractors;
- Consider the need to provide information about potential significant environmental impacts associated with the transportation or delivery, use, end-of-life treatment and final disposal of its products and services.

c) Maintaining and retaining documented information to the extent necessary to have confidence that the processes have been carried out as planned;

d) Adapting work to Employees. At multi-employer workplaces, the GNP GC has coordinated the relevant parts of the Integrated Management System with the other GNP GCs.

Reference document:

- List of outsource process

8.2 a) Requirements for services (QMS)**8.2.1 Customer communication**

Communication with Customer s is include

- a) Providing information relating to product
- b) Handling enquiries, requirement, including changes
- c) Obtaining Customer feedback relating to product, including Customer complaints
- d) Handling or controlling Customer property
- e) Establishing specific requirements for contingency actions, when relevant

8.2.2 Determining the requirements related to product

When determining the requirements for the product to be offered to Customer s, the GNP GC shall ensure that:

- a) The requirements for the product are defined, including:
 - 1) Any applicable statutory and regulatory requirements;
 - 2) Those considered necessary by the GNP GC;

b)The GNPGC can meet the claims for the products and services it offers.

8.2.3 Review of requirements related to services

8.2.3.1 The GNPGC shall ensure that it has the ability to meet the requirements for product to be offered to Customer s. The GNPGC shall conduct a review before committing to supply product to a Customer, to include:

- a)Requirements specified by the Customer, including the requirements for delivery and post-delivery Activities;
- b)Requirements not stated by the Customer, but necessary for the specified or intended use, when known;
- c)Requirements specified by the GNPGC;
- d)Statutory and regulatory requirements applicable to the services;
- e) Contract or requirements differing from those previously expressed.

The GNPGC shall ensure that contract or requirements differing from those previously defined are resolved.

The Customer's requirements shall be confirmed by the GNPGC before acceptance, when the Customer does not provide a documented statement of their requirements.

8.2.3.2 The GNPGC shall retain documented information, as applicable:

- a)On the results of the review;
- b)On any new requirements for the products and services.

8.2.4 Changes to requirements for products and services

The GNPGC shall ensure that relevant documented information is amended, and that relevant Persons are made aware of the changed requirements, when the requirements for product are changed.

Procedure Ref: Customer Complaint

8.2 Design (EnMS)

GNPGC considers energy performance improvement opportunities and operational control in the design of new, modified and renovated facilities, equipment, systems and energy-using processes that can have a significant impact on its energy performance over the planned or expected operating lifetime.

GNPGC retains documented information of the design activities related to energy performance

8.3 Procurement (EnMS)

GNPGC established and implemented criteria for evaluating energy performance over the planned or expected operating lifetime, when procuring energy using products, equipment and services which are expected to have a significant impact on GNPGC 's energy performance.

When procuring energy using products, equipment and services that have, or can have, an impact on SEUs, GNPGC informs suppliers that energy performance is one of the evaluation criteria for procurement.

Where applicable, GNPGC defines and communicates specifications for:

- a) Ensuring the energy performance of procured equipment and services;
- b) the purchase of energy

Ref: Procedure for Purchase, Design, Modification. En-P-11

8.3 Design and development of product:

8.3.1 General

GNPGC has got a separate department functioning in the guidance of Quality Person.

8.3.2 Design & Development planning

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- a) The nature, duration and complexity of the D & D activities;
- b) The required process stages, including applicable development reviews
- c) The required development verification and validation activities;
- d) D & D department is responsible for the R & D activities for product and Productions in consultation with the MD .
- e) The internal and external resource needs for the development of products;
- f) The need to control interfaces between Persons involved in the D & D process;
- g) The need for involvement of customers and users in the D & D process;
- h) The requirements for subsequent provision of products and services;
- i) The level of control expected for the development process by customers and other relevant interested parties;

8.3.3 Design & Development inputs

GNPGC has determined the requirements essential for Product developed. GNPGC has considered:

- a) Technical requirements
 - b) Customer specification
 - c) Statutory and regulatory requirements;
 - d) Functional requirements are received from the customers.
- Product is prepared based on these information's. The inputs are reviewed and ambiguities are resolved internally as well as with customer if necessary.
- d) GNPGC standard;
 - e) Potential consequences of failure due to the nature of the products and services. GNPGC ensure that D & D inputs are adequate, complete and unambiguous. Conflicting development inputs shall be resolved.

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8.3.4 Design & Development controls

GNPGC has applied controls to the development process to ensure that:

- a) The results to be achieved are defined;
- b) Reviews are conducted to evaluate the ability of the results of development to meet requirements;
- c) Verification activities are conducted to ensure that the development outputs meet the input requirements;
- d) Validation activities are conducted to ensure that the resulting products meet the requirements for the specified application or intended use;
- e) Any necessary actions are taken on problems determined during the reviews, or verification and validation activities;

8.3.5 Design & Development outputs

GNPGC ensure that D & D outputs:

- a) Meet the input requirements;
- b) Are adequate for the subsequent processes for the provision of products and services;
- c) Include or reference monitoring and measuring requirements, as appropriate, and acceptance criteria;
- d) Specify the characteristics of the products that are essential for their intended purpose and their safe and proper provision.

8.3.6 Design & Development changes

GNPGC identify, review and control changes made during, or subsequent to, development of products, to the extent necessary to ensure that there is no adverse impact on conformity to requirements.

GNPGC retain documented information on:

- a) Development changes;
- b) The results of reviews;
- c) The authorization of the changes;
- d) The actions taken to prevent adverse impacts.

Document ref: Design and development records

8.4 Control of externally provided processes, and services

8.4.1 General

Externally provided processes, product & services include:

- a) Product & Services required from a supplier
- b) Outsourcing processes to an external provider

The GNPGC has established a process to ensure that externally provided processes product & services conform to requirements.

The GNPGC determines the controls to be applied to externally provided processes, products and services. The GNPGC has determined and applied criteria for:

- a) Evaluation of suppliers
- b) Selection of suppliers
- c) Monitoring of Performance of suppliers and
- d) Re-evaluation of external providers

The documented information of these activities and any necessary actions arising from the evaluations are retained.

8.4.2 Type and extent of control

It is ensured that externally provided processes, product & services do not adversely affect the GNPGC's ability to consistently deliver best in class products to the Customer.

The GNPGC has established sufficient controls to:

- a) Ensure that externally provided processes and products remain within the control of its Quality and having not adverse effect on environment
- b) Define both the controls that it intends to apply to an external provider and those it intends to apply to the resulting output
- c) Take into consideration:
 - i. The potential impact of the externally provided processes, services on the GNPGC's ability to consistently meet Customer and applicable statutory and regulatory requirements
 - ii. The effectiveness of the controls applied by the external provider

- c) Determine the verification, or other activities, necessary to ensure that the externally provided processes, services meet requirements.

8.4.3 Information for external providers

The GNPGC shall ensure the adequacy of requirements prior to their communication to the external provider.

The GNPGC shall communicate to external providers its requirements for:

- a) the processes, services to be provided;
- b) the approval of:
 - 1) Products and services;
 - 2) Methods, processes and equipment;
 - 3) The release of products and services;
- c) competence, including any required qualification of Persons;
- d) the external providers' interactions with the GNPGC;
- e) control and monitoring of the external providers' Performance to be applied by the GNPGC;
- f) Verification or validation activities that the GNPGC, or its Customer, intends to perform at the external providers' premises.

Document ref:

Supplier performance evaluation

- ☐ Approved supplier list

8.5 Production and service provision

8.5.1 Control of production and service provision

The GNPGC has implemented production and service provision under controlled conditions. Controlled conditions include, as applicable:

- a) The availability of documented information that defines:
 - 1) The characteristics of the products to be produced, the services to be provided, or the activities to be performed

- 2) The results to be achieved
- b) The availability and use of suitable monitoring and measuring resources
- c) The implementation of monitoring and measurement activities at appropriate stages to verify that criteria for control of processes or outputs, and acceptance criteria for products and services, have been met
- d) The use of suitable infrastructure and environment for the operation of processes
- e) The appointment of competent Persons, including any required qualification
- f) The validation, and Periodic revalidation, of the ability to achieve planned results of the processes for production and service provision, where the resulting output cannot be verified by subsequent monitoring or measurement
- g) The implementation of actions to prevent human error
- h) The implementation of release, delivery and post-delivery activities.

8.5.2 Identification and traceability

The organisation identifies, where appropriate, the Daily production by suitable means throughout product realization

Traceability is maintained through the production records on daily basis.

Reference:

Production records

8.5.3 Property belonging to Customer or external providers

The GNPGC shall exercise care with property belonging to Customer s or external providers while it is under the GNPGC's control or being used by the GNPGC. The GNPGC shall identify, verify, protect and safeguard Customer s' or external providers' property provided for use or incorporation into the products and services. When the

property of a Customer or external provider is lost, damaged or otherwise found to be unsuitable for use, the GNPGC shall report this to the Customer or external provider and retain.

Documented information on what has occurred.

Reference:

External origin document

8.5.4 Preservation

The GNPGC shall preserve the result of test performed to the extent Necessary to ensure conformity to requirements.

8.5.5 Post-delivery activities

The GNPGC shall meet requirements for post-delivery activities associated with the service.

In determining the extent of post-delivery activities that are required, the GNPGC shall consider:

- a) Statutory and regulatory requirements;
- b) The potential undesired consequences associated

with its services; c) The nature, use and intended
prime of its services;

Customer requirements;

d)Customer feedback.

8.5.6 Control of changes

The GNPGC reviews and control changes for service provision, to the extent necessary to ensure continuing conformity with requirements. The GNPGC retains documented information describing the results of the review of changes; MD is authorized for change, and any necessary actions arising from the review.

8.6 Release of services

The GNPGC implements planned arrangements, at appropriate stages, to verify that the Customer requirement has met. The release of Product to the Customer is not proceeding until the planned arrangements (final inspection) have been satisfactorily completed, unless otherwise approved by a relevant authority and, as applicable, by the Customer. The GNPGC retains documented information on the release of product

The records include:

- a) Evidence of conformity with the acceptance criteria (final test reports)
- b) Traceability to the Person(s) authorizing the release (signing authority)

8.7 Control of nonconforming outputs

8.7.1 The GNPGC ensures that outputs that do not conform to their requirements are identified and controlled to prevent their unintended use or delivery. The GNPGC identifies and quarantines the products and takes appropriate action based on the nature of the nonconformity and its effect on the conformity of services. This also applies to nonconforming services detected after delivery of products, during or after the provision of services. The GNPGC deals with nonconforming outputs in one or more of the following ways:

- a) Correction
 - b) Segregation, containment, return or suspension of provision of products and services
 - c) Informing the Customer
 - d) Obtaining authorization for acceptance under concession.
- Conformity to the requirements shall be verified when nonconforming outputs are corrected.

8.7.2 The GNPGC retains the documented information that:

- a) Describes the nonconformity
- b) Describes the actions taken

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- c) Describes any concessions obtained
- d) Identifies the authority deciding the action in respect of the nonconformity.

Procedure Reference: control of Non-conforming product

9.1 Monitoring, measurement, analysis and evaluation

9.1.1 General

Monitoring and measurement of process is done:

- a) To determine and establish capability of new processes to conform to requirements.
- b) To monitor these processes over time to verify ongoing stability and capability to meet requirements.
- c) To determine and achieve levels of continual improvement.

The GNPGC determines:

- a) What needs to be monitored and measured in respect to Integrated Management System?
- b) The method for monitoring, measurement, analysis and evaluation needed to ensure valid results.
- c) The frequency of monitoring and measuring.
- d) Analysis and evaluation results of the monitoring and measurement.

The evaluation of the performance and the effectiveness of the Integrated Management System done through:-

- a) Internal Audit
- b) Data analysis
- c) Customer feedback/complaints
- d) IMS Objectives

The GNPGC retains appropriate documented information as evidence of the results.

9.1.2 Evaluation of Compliances

The GNPGC has establish, implement and maintained a process (es) for evaluating compliance with legal requirements and other requirements

The GNPGC has

- a) Determined the frequency and Method(s) for the evaluation of compliance;
- b) Evaluate compliance and take action if needed
- c) Maintain knowledge and understanding of its compliance status with legal requirements and other requirements;
- d) Retain documented information of the compliance evaluation result(s).

The GNPGC has retains documented information as evidence of the compliance evaluation results.

A summary of performance data must be included in periodic management review.

Reference Documents:

- ☐ legal review register :
- ☐ NCR records
- ☐ CAR

9.2 Internal Audit

9.2.1 The GNPGC conducts internal audits to provide information on whether the

Integrated Management System conforms to:

- ☐ Annual Audit schedule is prepared by IMS LEADER on basis of importance of activity to be checked including any unresolved non-conformity of previous audit and is conducted on a frequency of one year in such a way that each area is covered.
- ☐ Internal auditors could be selected internally or externally for conducting the audits. Any internal auditor shall not audit his own deptt. Third party audits are also acceptable.
- ☐ IMS Leader shall discuss with the appointed auditor and auditee and shall prepare the —Internal Audit Schedule|| The Internal Audit Schedule is circulated to the auditee to ensure their availability on the respective dates.
- ☐ Internal audits are organized and carried out through auditors.

- ☐ In case of any Non - Conformity of the System; —NC Report is issued by auditor. Auditee shall review NCR's and take corrective/Preventive action within acceptable time period to the auditor. Constraints of resource required shall be put in Management Review.
- ☐ Corrective action taken shall be verified and the auditor shall close NCR within the agreed time frame.
- ☐ IMS LEADER prepares Internal Audit Summary of audit conducted is prepared based on NCR's and review is presented in Management Review.
- ☐ Changes in any implemented system, as a consequence of NCR's are implemented with a view to remove deficiencies in the management system.

Process Input	Process Output	Responsibility
Integrated Management	Internal Audit Schedule	IMS Leader
System Audit	NCR report	
	Internal Audit Summary	

Process – Internal Audit**Document ref**

Internal audit plan
Internal audit schedule
Internal audit Summary
Non-conforming records
CAR

9.3 Management Review

The management reviews the Integrated Management System to ensure its continuing suitability, adequacy,

effectiveness and alignment with the strategic direction of the GNP GC

- ☐ Management Review Meeting (MRM) shall be conducted Once in a year preferably after closer of noncompliance observed during Internal Audit.
- ☐ The review meeting shall be coordinated by IMS Leader and chaired by the MD.
- ☐ All departmental heads shall take part in the review meeting. IMS Leader shall inform (Date, Time, Venue and Agenda) to all the members through Agenda of Meeting before one week of review meeting.
- ☐ The agenda for Management Review Meeting shall be as follows:-
 - a) The status of actions from previous management reviews
 - b) Changes in
 - ☐ External and internal issues that is relevant to the Integrated Management System.
 - ☐ Need and expectation of the interested parties , including compliance obligations;
 - ☐ its significant environmental aspects;
 - ☐ risks and opportunities;
 - ☐ legal requirements and other requirements;
 - c) the extent to which the IMS policy and the IMS objectives & Energy target have been met;
 - d) information on the IMS performance, including trends in
 - 1) Incidents, nonconformities, corrective actions and continual improvement;
 - 2)Monitoring and measurement results;
 - 3) Fulfillment of its compliance obligation and Results of evaluation of compliance with legal requirements and other requirements;
 - 4)audit results;
 - 5)Consultation and participation of Employees;
 - 6)Risks and opportunities;
 - 7) Customer satisfaction and feedback

- 8) Process performance and conformity of product and services
 - 9) Performance of external providers
 - 10) IMS Policy
- e) Energy Performance & energy performance improvement based on monitoring and measurement result including the EnPI

- e) Adequacy of resources;
- f) Relevant communication(s) from interested parties, including complaints;
- g) Opportunities for continual improvement.

Management review meeting result action related:

- a) the continuing suitability, adequacy and effectiveness of the Integrated Management System in achieving its intended outcomes;
- b) continual improvement opportunities;
- c) IMS Policy
- d) The EnPI Or EnB
- e) any need for changes to the Integrated Management System ;
- f) resources needed;
- g) actions, if needed when IMS objectives,IMS Target,action plan have not been achieved;
- h) Opportunities to improve integration of the Integrated Management System with other business processes and to improve energy performance.
- i) any implications for the strategic direction of the GNPGC

IMS LEADER shall maintain the minutes of the Management Review Meeting in format.

This record shall be retained for a minimum period of three years.

4.7.1 The action requirement arising out of the meetings are forwarded to concerned department for necessary action.

5.0 Process – Management Review Meeting

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Process Input	Process Output	Responsibility
MRM Agenda	MRM Minutes Record (Output)	IMS Leader /Top Management.

Procedure ref:

- ☐ Procedure for MRM

Document ref:

- ☐ Agenda MRM
- ☐ MRM Minutes Records

Responsibility:

- ☐ Top management
- ☐ IMS Leader.
- ☐ Dept Head

10.1 General

The GNPGC has determined opportunities for improvement and implements necessary actions to achieve the intended outcomes of its Integrated Management System.

10.2 Incident, Nonconformity and corrective action

The GNPGC shall establish, implement and maintain a process (es), including reporting, investigating and taking action, to determine and manage incidents and nonconformities.

When an incident or nonconformity occurs, the GNPGC shall:

- a) React in a timely manner to the incident or nonconformity and, as applicable:
 - 1) Take action to control and correct it;
 - 2) deal with the consequences;
- b) Evaluate, with the participation of Employees (see 5.4) and the involvement of other relevant interested parties, the need for

corrective action to eliminate the root cause(s) of the incident or nonconformity, in order that it does not recur or occur elsewhere, by:

- 1) Investigating the incident or reviewing the nonconformity;
 - 2) Determining the cause(s) of the incident or nonconformity;
 - 3) Determining if similar incidents have occurred, if nonconformities exist, or if they could potentially occur;
 - c) review existing assessments of IMS risks and other risks, as appropriate (see 6.1);
 - d) determine and implement any action needed, including corrective action, in accordance with the hierarchy of controls (see 8.1.2) and the management of change (see 8.1.3);
 - e) Assess IMS risks that relate to new or changed hazards, prior to taking action
 - f) Review the effectiveness of any action taken, including corrective action;
 - g) Make changes to the Integrated Management System, if necessary.
- Corrective actions shall be appropriate to the effects or potential effects of the incidents or nonconformities encountered.

The GNPGC shall retain documented information as evidence of:

- The nature of the incidents or nonconformities and any subsequent actions taken;
- The results of any action and corrective action, including their effectiveness.

The GNPGC shall communicate this documented information to relevant Employees, and, where they exist, Employees' representatives, and other relevant interested parties

Reference documents:

- ☐ Incident Records
- ☐ Near Miss Report
- ☐ CAR

Responsibility:

- ☐ Top management

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- ☐ IMS Leader
- ☐ Plant supervisor

10.3 Continual improvement

The GNPGC continually improves the suitability, adequacy and effectiveness of the Integrated Management System.

The GNPGC considers the results of analysis & evaluation, and the outputs from Management Review, to determine if there are needs & opportunities that has be addressed as a part of continual improvement.

Reference documents:

- ☐ MRM Minutes Records

Responsibility:

- ☐ Top management
- ☐ IMS Team
- ☐ IMS Leader.

Where applicable, the results of the energy performance consideration is incorporated into specification, design and procurement activities.

<p>AUDIT REPORT <i>ISO 50001:2018 (EnMS)</i></p>
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INTERNAL AUDIT REPORT

**AUDITED ORGANISATION: GOVERNMENT NEHRU
P. G. COLLEGE, DONARGARH, AND DISTT.
RAJINGAON(CG)**

AUDIT REPORT

ISO 50001:2018 (EnMS)

Name of the Organization	GOVERNMENT NEHRU P. G. COLLEGE	
Address	DONARGARH, DISTT. RAJINGAON- 491445, CHHATTISGAR, INDIA	
Scope	:- “PROVISION FOR QUALITY ASSURANCE IN HIGHER EDUCATION, ARTS, SCIENCE AND COMMERCE.”	
Audit Team	Nitin	
Date of Audit	23.10.2021	
Brief about the organization	Post Graduate College	

Energy Management System ISO 50001:2018

Number of Sites to be Audited? ☒ **Single**

Annual Energy Consumption=

Number of energy Sources= One CEB

Number of significant energy uses (SEUs) = Not very high energy consumers, except- Air conditioners

ISO 50001:2018 EnMS Requirements	C/O/NCR	Comments
4.1 Understanding the organization and its context	C	Ref .No. GNP GC-IMSM-01 Rev-00, Issue-2, Page No-23 Verified with IMS leader
4.2 Understanding the needs and expectations of interested parties	C	Ref .No. GNP GC-IMSM-01 Rev-00, Issue-2, Page No-25
4.3 Determining the scope of the energy management system	C	Ref .No. GNP GC-IMSM-01 Rev-00, Issue-2, Page No-27
4.4 Energy management system	C	Ref .No. GNP GC-IMSM-01 Discribed in IMS manual Implementantion verified with Team leader-IMR
5.1 Leadership and commitment	C	Principial is head of the institute, committed for maintainance of EnMS committement reflected in CL-5.1 of IMSM

AUDIT REPORT
ISO 50001:2018 (EnMS)

ISO 50001:2018 EnMS Requirements	C/O/NCR	Comments
5.2 Energy policy	C	Very well designed, documented in IMS manual at page-32, displayed and understud by staff.
5.3 Organization roles, responsibilities and authorities	C	All staff members are well aware of roles and responsibilities, discussed in manual-P no.32
6.1 Actions to address risks and opportunities	C	Addressed in manual –Page-33 & 34 all aspects were covered.
6.2 Objectives, energy targets and planning to achieve them	C	Verified with IMR as documented on page no.38/39 of manual
6.3 Energy review	C	As planned done by IMR
6.4 Energy performance indicators	C	EPI- varies with respect to college curriculum, as the strength of students chanegs
6.5 Energy baseline	C	Base line calculated on the basis of averaging the monthly consumption of power. Manual-page no-41
6.6 Planning for collection of energy data	C	GNPGC ensured that the equipment used for measurement of key characteristics provides data which are accurate and repeatable. Energy data is collected on monthly basis, as bills are produced by electricity board.
7.1 Resources	C	Adequate resources are available, to fulfil the requirements.

AUDIT REPORT
ISO 50001:2018 (EnMS)

ISO 50001:2018 EnMS Requirements	C/O/NCR	Comments
7.2 Competence	C	<p><i>Determined the necessary competence of employees through skill evaluation of person(s) doing work under its control that affects the performance and effectiveness of the Integrated Management System and its effect in energy Performance</i></p> <p><i>Ensured that these persons are competent on the basis of appropriate education, training, or experience.</i></p> <p>Job Profile- F607</p>
7.3 Awareness	C	<p>Training was given to responsible persons and HOD's for EnMS, by external consultant, on 14th Augst 21, Training Record F-611</p> <p>Training Effectiveness- F-612</p>
7.4 Communication	C	<p>Its generally by-E-mails, cell phones, meetings, training etc.</p>
7.5 Documented information 7.5.1 General 7.5.2 Creating and updating 7.5.3 Control of documented information	C	<p>Good documentation done as they have QMS &EMS certifications already, now they are going for EnMS. – Total -20 SOP's</p>
8.1 Operational planning and control	C	<p>Operation planing and control- MR /SOP-13 evident</p> <p>Emergency Preparedness- MR/SOP-07</p>

AUDIT REPORT
ISO 50001:2018 (EnMS)

ISO 50001:2018 EnMS Requirements	C/O/NCR	Comments
8.2 Design	C	Not very much planned as the college is affiliated by University, courses are designed by University but teaching process is designed by teaching staff and administration
8.3 Procurement	C	There were no procurements for energy, in last one year, due to Covid-19, college remained closed for most of the time.
9.1 Monitoring, measurement, analysis and evaluation of energy performance and the EnMS 9.1.1 General 9.1.2 Evaluation of compliance with legal requirements and other requirements	Obs	M&M are done by administration, no control was observed to reduce the energy consumption
9.2 Internal audit	C	Last internal audit conducted on 10.09.2021, by external auditor, verified following records- AUDIT PLAN-F601, AUDIT SCHEDULE- F602, INTERNAL AUDIT SUMMARY-F604, NON CONFORMITY RECORDS F605 Internal Audit Procd-MR/SOP/06
9.3 Management review	C	Last MRM conducted on 25.09.2021, chaired by Principal, all agenda points of IMS were discussed, verified record of MRM- F- 608- Management Review Procd.MR/SOP-05
10.1 Nonconformity and corrective action	Obs	CORRECTIVE ACTION REQUEST FORM- F-803, No records of CA & PA were

AUDIT REPORT ISO 50001:2018 (EnMS)

ISO 50001:2018 EnMS Requirements	C/O/NCR	Comments
		available
10.2 Continual improvement	C	Its visible

Summary of Audit

College is already having ISO-9001:2015 & ISO 14001:2015 certificates and NAAC accreditation, It is positive status, that they have team of experienced staff and teachers, who can implements and maintain Energy management system in the college easily, during virtual audit it was observed, staff needs more orientation for EnMS for proper inducting it in integration with other management systems. EnMS team should spread the message of energy conservation in the college staff and students.

Environment Audit



Quality Audit



GOVT. NEHRU PG COLLEGE	Ref .No. GNPGC- IMSM-01
INTEGRATED MANAGEMENT SYSTEM MANUAL	Rev. 00, Issue No.02
(ISO 9001:2015, ISO 14001:2015 & ISO 50001:2018)	Issue Date. 13/08/2021

GOVERNMENT NEHRU P. G. COLLEGE

DONARGARH, DISTT. RAJINGAON- 491445

CHHATTISGAR, INDIA

**INTEGRATED MANAGEMENT SYSTEM MANUAL (ISO:
9001, 14001:2015 & 50001:2018)**

DR.K.L.TANDEKAR – PRINCIPAL

COLLEGEDGG@GMAIL.COM

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DISTRIBUTION AND AMENDMENT SHEET						
S.NO.	Revision/Issue No.	Section/ Page No	Details of amendments	Date of change	Amendment by	Remarks

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1.0 SCOPE

Scope of the College:- "PROVISION FOR QUALITY ASSURANCE IN HIGHER EDUCATION, ARTS, SCIENCE AND COMMERCE."

Non applicability of clauses (If any with justification): NIL

College Profile

This college was established in 1964 as a privately managed institution with Arts & Commerce faculties teaching degree courses. In 1973 it was taken over by the then M. P. government. Despite being situated in an educationally backward area, the College continued its progress. In 1981 PG level teaching in Commerce and Pol. Sc. was started. The faculty of Science came into existence in 1983. Between 1987 and 2003 PG level teaching in five subjects, i.e., Geography, History, Economics, Hindi Literature and Mathematics was started. Computer Application Course as an additional subject in Commerce has been started from the session 2006-07. At present this college is Research Centre for Ph.D. in Pol. Sc, and Commerce. In 2008 the Dept. of Higher Education, Govt. of Chhattisgarh declared this college as a Post Graduate college.

Mission

To advance the quality of teaching in order to produce world class personalities with an ability to adapt to the intellectually challenging environment. To emerge as a centre of excellence and eminence by imparting futuristic education in keeping with global standards, making our students competent and ethically strong so that they can readily contribute to the rapid advancement of society and mankind. To impart educational and moral values in its students and to bring about better co-existence of a human being and universe.

Vision

The vision of the College is to impart meaningful learning process to its students. To enable this vision, College has been engaged in relentless pursuit of imbibing educational and social values in its students .The College looks forward to excel in the educational and various other related fields to educate and train its students to become a better person.

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Objectives

To provide sufficient opportunity for women in higher education by government. To provide sufficient opportunity for all round development of women. To provide social awareness among women To develop humanity among women To prepare women candidate as standard citizen of our society.

0.4 APPROVAL

The Integrated Management System defines various processes & activities carried out in GOVT. NEHRU PG COLLEGE to ensure the uninterrupted system. It contains cross-references to other relevant documents or those of external origin used by the System.

This manual has been aligned with the requirements of ISO 9001:2015, ISO 14001:2015 & ISO 50001:2018 international standards; all applicable statutory Regulatory requirements are GOVT. NEHRU PG COLLEGE mission and policies. All the authorized persons are required to ensure compliance to its requirements.

This Integrated Management System Manual is hereby approved & issued to all authorized holders: -

Prepared By:

IMS LEADER

Date 10.08.21

Approved By

Principal

Date 13.08.21

0.5 COURSES OFFERED BY COLLEGE

- B.A
- B.Sc.
- B.Com
- Computer Application (additional subject in B.Com)
- M.A. (HINDI LITERATURE)
- M.A. (GEOGRAPHY)
- M.A. (POL.Sc.)
- M.A. (HISTORY)
- M.A. (ECONOMICS)

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- M.COM
- M.Sc (MATHEMATICS)
- PGDCA
- M.A. (ENGLISH)
- M.Sc (ZOOLOGY)
- CERTIFICATE COURSE IN ENGLISH TRANSLATION

DEPARTMENTS

- ENGLISH
- HINDI
- GEOGRAPHY
- POL. SC.
- HISTORY
- ECONOMICS
- HOME SCIENCE
- COMMERCE
- PHYSICS
- CHEMISTRY
- MATHEMATICS
- ZOOLOGY
- BOTANY

Research

The Research culture has been fostered in the institution, with constant encouragement to teachers and the students to indulge into research activities. Department of Commerce & proposal has been sent for the department of Political Science, Economics and History. Some of the departments of science are in pipeline for the same as the science stream has recently shifted to the present campus and the labs are being established with the same purpose. Registered Research Supervisors are **05** in all, including the Principal of the institution. About **10** research scholars have been already awarded their Ph.D. The faculty members try to get their Research papers & Review articles published in reputed Journals; and during the last 5 years the total number of publications has reached up to **114**,. 1 Book is published by the principal of the institute.

Activities:

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0.6 Distribution List

S. NO	COPY HOLDER	COPY
1.	Principal	Master Copy
2.	IMS Leader	Controlled Copy
3.	HODs	Controlled Copy
4.	Certifying Body	Controlled Copy

STRUCTURE OF THE MANUAL

This Integrated Management System Manual is structured as shown in the content section of the Manual. Different sections of the Integrated Management System Manual are arranged sequentially as per section numbers and correlated with the clause numbers of ISO 9001:2015, ISO 14001:2015 And ISO 50001:2018 standards.

The current issue number and amendment no. is given on each page. Issue no. 01 has been given to first issue of this manual. This manual is available in English Language Only. The original Copy bears rubber stamp of "Master Copy" on reverse of each page. All Controlled copies issued to the concerned individual (as per distribution list) are legibly copied from Master Copy and bear rubber stamp "CONTROLLED COPY" in red color on first page of the Manual.

Any additional copies of the Manual, required for external agencies, are issued by the **IMS LEADER** and such copies of the Manual issued are stamped "UNCONTROLLED". These uncontrolled copies neither comes under the purview of document amendment procedure nor used within the WAZIUL ISLAM FARM

MANUAL REVISION, UPDATION AND AMENDMENT PROCEDURE

The **IMS LEADER** to carry out the activities of preparing, issuing, maintaining & updation of this Integrated Management System Manual whereas the approval is done by **PRINCIPAL**

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The distribution of the Manual and the amendment(s) are controlled and this activity is carried out by the **IMS LEADER** .The Integrated Management System Manual is reviewed periodically by the **IMS LEADER** in consultation with the related departments. No revision is implemented unless it has been approved by the PRICIPAL **and** formally issued.

When amendment takes place, the amendments are indicated in each of the amended page(s), and recorded in the Amendment Sheet available in the controlled copies of the Manual. The insertion of the additional/amended sheet(s) and the removal of the old sheet(s) in the individual controlled copies as per the

2.0 Normative References:

The List of references which include Standards, Manuals, Procedures and applicable product Regulatory Requirements used in developing and implementing the systems is given below:

Standards:

ISO 9001:2015 Quality Management System

ISO 14001:2015 Environmental Management System

ISO 50001:2018 Energy Management System

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Statutory and regulatory requirements:

List of Applicable Legal Requirements

Approval of UGC

Approval of AICTE

Certified By NAAC

GOVT. NEHRU PG COLLEGE has identified and full fill the statutory and regulatory requirements as per Central, state and other local government or regulatory requirement in legal register (GNPGC-F 901)

3.0 TERMS AND DEFINITIONS

For the purposes of this document, the terms and definitions given in ISO 9001:2015, ISO 14001:2015& ISO 50001:2018 apply.

3.01 GNPGC

Person or group of people that has its own functions with responsibilities, authorities and relationships to achieve its objectives.

3.02 Interested party

Person or GNPGC that can affect, be affected by, or perceive themselves to be affected by a decision or activity.

3.03 Requirement

Need or expectation that is stated, generally implied or obligatory.

3.04 Management system

Set of interrelated or interacting elements of an GNPGC to establish policies and objectives and processes to achieve those objectives.

3.05 Top management

Person or group of people who directs and controls an GNPGC at the highest level.

3.06 Effectiveness

Extent to which planned activities are realized and planned results achieved.

3.07 IMS Policy

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Intentions and direction of an GNPGC, as formally expressed by its top management.

3.08 Objective

Result to be achieved.

3.09 Risk

Effect of uncertainty on an expected result.

3.10 Competence

Ability to apply knowledge and skills to achieve intended results.

3.11 Documented Information

Information required be controlling and maintaining by an GNPGC and the medium on which it is contained.

3.12 Process

Set of interrelated or interacting activities which transform inputs into outputs.

3.13 Performance

Measurable result.

3.14 Outsource Make an arrangement where an external GNPGC performs part of an GNPGC's function or process.

3.15 Monitoring

Determining the status of a system, a process or an activity.

3.16 Measurement

Process to determine a value.

3.17 Audit

Systematic and independent process for obtaining objective evidence and evaluating it objectively to determine the extent to which the audit criteria are fulfilled.

3.18 Conformity

Fulfillment of a requirement.

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3.19 Nonconformity

Non-fulfillment of a requirement.

3.20 Corrective Action

Action to eliminate the cause of nonconformity and to prevent recurrence.

3.21 Continual Improvement

Recurring activity to enhance performance.

3.22 Correction

Action to eliminate a detected nonconformity.

3.23 Involvement

Engagement in, and contribution to, shared objectives.

3.24 Context of the GNPGC

Business IMS combination of internal and external factors and conditions that can have an effect on an GNPGC's approach to its products, services and investments and interested parties.

3.25 Function

Role to be carried out by a designated unit of the GNPGC.

3.26 Customer

Person or GNPGC that could or does not receive a product or a service is intended for or required by this person or GNPGC.

3.27 External provider

Person or GNPGC that provides a product or a service.

3.28 Improvement

Any activity to enhance performance.

3.29 Management

Coordinated activities to direct and control an GNPGC.

3.30 Quality Management

Management with regard to quality.

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3.31 System

Set of interrelated or interacting elements.

3.32 Infrastructure

System of facilities, equipment and services needed for the operation of an GNPGC Integrated Management System with regard to quality/IMS

3.33 IMS Policy.

Policy related to IMS

3.34 Quality Policy

Policy related to quality.

3.35 Strategy

Planned activities to achieve an objective.

3.36 Object

Entity anything perceivable or conceivable.

3.37 Quality

Degree to which a set of inherent characteristics of an object fulfils requirements.

3.38 Statutory Requirement

Obligatory requirement specified by a legislative body.

3.39 Regulatory Requirement

Obligatory requirement specified by an authority mandated by a legislative body.

3.40 Defect

Nonconformity related to an intended or specified use.

3.41 Traceability

Ability to trace the history, application or location of an object.

3.42 Innovation

Process resulting in a new or substantially changed object.

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3.43 Contract

Binding agreement.

3.45 Quality Objective

Objective related to quality.

3.46 Output

Result of a process.

3.47 Product

Output that is a result of activities where none of them necessarily is performed at the interface between the provider and the Customer.

3.48 Service

Intangible output that is the result of at least one activity necessarily performed at the interface between the provider and the Customer.

3.49 Data

Facts about an object.

3.50 Information

Meaningful Data.

3.51 Objective Evidence

Data supporting the existence or verity of something.

3.52 Information system

Network of communication channels used within an GNPGC.

3.53 Knowledge

Available collection of information being a justified belief and having a high certainty to be true.

3.54 Verification

Confirmation, through the provision of objective evidence that specified requirements have been fulfilled.

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3.55 Validation

Confirmation, through the provision of objective evidence, that the requirements for a specific intended use or application have been fulfilled.

3.56 Feedback

Opinions, comments and expressions of interest in a product, a service or a complaints-handling process.

3.57 Customer Satisfaction

Customer's perception of the degree to which the Customer's expectations have been fulfilled.

3.58 Complaint

Customer satisfaction expression of dissatisfaction made to an GNPGC related to its product or service or the complaints-handling process itself, where a response or resolution is explicitly or implicitly expected.

3.59 Audit program

Set of one or more audits planned for a specific time frame and directed towards a specific purpose.

3.60 Audit criteria

Set of policies, documented information or requirements used as a reference against which audit evidence is compared.

3.61 Objective / Audit Evidence

Records, statements of fact or other information, which are relevant to the audit criteria and verifiable.

3.62 Audit findings

Results of the evaluation of the collected audit evidence against audit criteria.

3.63 Concession

Permission to use or release a product or service that does not conform to specified requirements.

3.64 Release

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Permission to proceed to the next stage of a process.

3.65 Characteristic

Distinguishing feature

3.66 Performance Indicator

Performance metric

3.67 IMS Management

Management with regard to IMS.

3.68 IMS Objective

Objective related to IMS.

3.69 IMS

Element of an GNPGC's activities or products or services that interacts or can interact with the IMS .

3.70 IMS Condition

State or characteristics of the IMS as a determined at a certain point in time.

3.71 IMS Impact

Change to the IMS whether adverse or beneficial wholly partially resulting from an GNPGC IMS aspects.

3.72 Prevention of pollution

Use of processes practices techniques materials products services or energy to avoid reduce or control (separately or in combination) the creation emission or discharge of any type of pollutant or waste, in order to reduce adverse IMS impacts.

3.72 Compliance Obligations

Legal requirements that an GNPGC has to comply with another requirement that an GNPGC has to or choose to comply with.

3.73 Life Cycle

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Consecutive and interlinked stages of a product (or services) system, from raw material acquisition or generation from natural resources to final disposal.

3.74 Contractor

A person(s) or any non-GOVT. NEHRU PG COLLEGE Entity that has contracted with GNPGC to supply manpower, services.

3.75 Contract Employee(S)

Any person(s) who is employed by contractors to carry out the contracted work. He is not employed directly Govt. Nehru PG College

3.76 College

College means all the technical & professional services & responsibilities to be performed by Govt. Nehru PG College as specified, stated, indicated in the Syllabus. .

3.77 Accident An unplanned or undesired event which can result harm to people, property or the IMS

3.78 Incident Event that results into an accident or have the potential to lead to an accident. The term Incident includes —Near Missesll.

3.79 Near Miss a Near Miss is an event where no contact or exchange of energy occurred and thus did not result in personal injury, asset loss or damage to the IMS .

3.80 Hazard

A Source or situation with a potential for harm in terms of human injury or ill health, damage to property, damage to the work place IMS or a combination of these.

3.81 Risk

A measure of the likelihood that the harm from a particular hazard will occur, taking into account the possible severity of the harm.

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3.82 Unsafe Act Or Condition Any act or condition that deviates from a generally recognized safe way or specified Method of doing a job and thus increases the potential for an accident.

3.83 Personal Protective Equipment (PPE) All equipment and clothing intended to be utilized, which affords protection against one or more risks to health and safety. This includes protection against adverse weather conditions

3.84 MSDS Material Safety Data Sheet: Mandatory information that must Govt. Nehru PG College almost every chemical in the workplace except for items like cleaning supplies. MSDS includes details such as the risks, precautions and first aid procedures associated with the chemical

3.85 Energy management team

Person with responsibility and authority for effective implementation of an energy management system (3.2.2) and for delivering energy performance improvement (3.4.6).

Note 1 to entry: The size and nature of an GNPGC (3.1.1) and available resources are taken into account when determining the size of an energy management team. A single person can perform the role of the team

3.86 energy performance

Measurable result(s) related to energy efficiency (3.5.3), energy use (3.5.4) and energy consumption (3.5.2)

3.87 Energy performance indicator (EnPI)

Measure or unit of energy performance (3.4.3), as defined by the GNPGC (3.1.1)

3.4.5 Energy performance indicator value (EnPI value)

Quantification of the EnPI (3.4.4) at a point in or over a specified period of time **3.88 Energy performance improvement**

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Improvement in measurable results of energy efficiency (3.5.3), or energy consumption (3.5.2) related to energy use (3.5.4), compared to the energy baseline (3.4.7)

3.89 energy baseline (EnB)

Quantitative reference(s) providing a basis for comparison of energy performance (3.4.3)

3.90 static factors

Identified factor that significantly impacts energy performance (3.4.3) and does not routinely change

3.91 relevant variable

Quantifiable factor that significantly impacts energy performance (3.4.3) and routinely changes

3.4.10 normalization

Modification of data to account for changes to enable comparison of energy performance (3.4.3) under equivalent conditions

GROSSARY AND ABBREVIATION:

S.NO	ABBREVIATION	DESCRIPTION
1	GNPGC	GOVT. NEHRU PG COLLEGE
2	IMS	INTIGRATED MANAGEMENT SYSTEM (QUALITY, ENVIORNMENT & ENERGY MANAGEMENT SYSTEM)
3	QMS	QUALITY MANAGEMENT SYSTEM
4	EMS	ENVIORNMENTAL MANAGEWMENT SYSTEM
5	OHSMS	OCCUPATIONAL HEALTH AND SAFETY MANAGEMENT SYSTEM
6	EnMS	ENERGY MANAGEMENT SYSTEM
7	BP	BUSSINESS PROCESS
8	OC	ORGANISATION CHART
9	QF	QUALITY FORMAT
10	IA	INTERNAL AUDIT
11	MRM	MANAGEMENT REVIEW MEETING
12	NC	NON CORFORMANCE
13	CA	CORRECTIVE ACTION
.14	PA	PREVANTIVE ACTION

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15	NCP	NON CONFORMING PRODUCT
16	NCR	NON CONFORMANCE REPORT
17	EP	EXTERNAL PROVIDER
18	R &A	RESPONSIBILITY AND AUTHORITY
19	IQA	INTERNAL QUALITY AUDIT
20	HR	HUMAN RESOURCE

4. CONTEXT OF THE ORGANISATION

4.1 UNDERSTANDING THE ORGANISATION AND ITS CONTEXTS:

The GNPGC has determined the external and internal issues that are relevant to its purpose and that affect its ability to achieve the intended outcomes of its Integrated Management System; the GNPGC has defined the internal and external issues.

The internal and external issues has determined by the key personals of the GNPGC

The GNPGC has also considered IMS condition and personal safety being affected by or capable of affecting GNPGC.

The GNPGC has monitored and reviewed information about these external and internal issues in Management Review Meeting at a defined interval.

INTERNAL ISSUES.

ORGANISATION CONTEXT (INTERNAL)

S. No.	Issues	Status	Positive	Negative	Recommend ation Action
1	Competence	Top Level Management is competent	Positive	—	Risk analysis
		Middle Level Management is competent	Positive	-	-
2	Space	Skilled /unskilled trained Employees	Positive	-	-
		Adequate space	Positive	-	Risk analysis
3	Values	Defined and implemented	Positive	—	Risk analysis

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4	Culture	Good	Positive	—	Risk analysis
5	Tools and	Adequate and state	Positive	-	- Risk
	Equipment	of art technology			analysis
6	Employees	Safety committee			
	Harassment	team is monitor all	Positive	-	Risk analysis
		employees issues			
		Management			
7	Energy	Program/Monitoring	Positive	-	Risk analysis
	usage/Consumption	Records			

ORGANISATION
CONTEXT

(EXTERNAL)

S. No.	Factor	Status	Positive	Negative	Recommend ation Action
1	Legal	Defined Local laws (statutory, regulatory other requirement) Medical laboratory norms	Positive	—	Risk analysis and reviewed at defined frequency
2	Customer	Defined	Positive	-	Risk

		Specification			analysis
3	Reputation in market	High reputation	Positive	-	Risk analysis
4	Media	Failing in advertising through media is threat But College is advertising themselves positively	Positive	-	Risk analysis
5	External Communications	Interaction with Customer s/ legal authority	Positive	-	Risk analysis
6	Technology	New and advanced technology is used by GNP GC	Positive	-	Risk analysis

Document reference:

- Management Review Meeting. GNP GC-F501

Responsibility:

- Top management

4.2 UNDERSTANDING THE NEED AND EXPECTATION OF EMPLOYEES AND INTERESTED PARTIES

The GNP GC has determined:

- The interested parties in addition to the Employees that are relevant to the Integrated Management System ; Relevant

need and expectations (requirement) of these interested parties and Employees ;

- Need and expectation become its compliance obligations (legal and other requirement)

GNPGC has defined the need and expectation of the Employees and interested parties refer in below section and reviewed and monitor during the management review meeting

Document reference:

- Management Review Meeting GNPGC-F501

Responsibility:

- Top management
- IMS LEADER

NEED AND EXPECTATION OF INTRESTED PARTIES AND EMPLOYEES

INTRESTED PARTIES	RELIVANTIMS NEED AND EXPECTATION	COMPLIANCE OBLIGATION
Stakeholder/owner	Sustainable business/business continuity/maximize shareholder value, brand management, compliance with legal, contractual and Customer requirement	Identify and manage risk and opportunities
Corporate	May have specific IMS or regulatory requirement Centralized procurement program	Comply with corporate IMS and regulatory requirement; comply with mandated contracting requirement and purchasing agreement.
Employees	Safe air , water quality and	OHSA indoor air and

	notice level , work safety , Pride in GNPGC Timely growth	noise regulation EPA clean water Act
Workers	Good Health, safe Environment and timely payment	Medical and E.S.I &P.F
Customer	Good Quality and timely delivery of product	As per P.O
Neighbor/community	No dusting Environment or air pollution, and safe and healthy environment confined space.	Boundary around the confined space, mining below the 20 ft from ground level .
Local /county /other legal Regulator	Complies with city/country	Applicable city ordinance.

4.3 DETERMINING THE SCOPE OF THE INTEGRATED MANAGEMENT SYSTEM

Scope of college is

“PROVISION FOR QUALITY ASSURANCE IN HIGHER EDUCATION, ARTS, SCIENCE AND COMMERCE.”

The GNPGC has determined the boundaries and applicability of the IMS Management system to establish its scope;

During determining this scope, GNPGC has considered:

- The external and internal issues referred to in Section no. **4.1**
Take into account the requirement and Compliance obligation referred to in Section no 4.2

- GNPGC unit, function and physical boundaries and also Take into account the planned or performed work –related activities.
- Its activities, product and services **(14001:2015)**
- Its authority and ability to exercise control and influence **(14001:2015)**

The Integrated Management System has included the activities, product and services within the GNPGC control or influence that can impact the GNPGC's IMS performance.

Document reference: Refer section no. 01 of this manual.

Responsibility:

- Top management
- IMS LEADER

4.4 INTEGRATED MANAGEMENT SYSTEM

The GNPGC has established, implement, maintained and continually improve an INTEGRATED MANAGEMENT SYSTEM included process needed and their interaction in accordance with IMS **(ISO 9001:2015 , ISO 14001:2015 & ISO 50001:2018)** standard requirement.

Responsibility:

- Top management
- IMS LEADER

5.1 LEADERSHIP AND COMMITMENT:

Top management has demonstrated leadership and commitment with respect to the Integrated Management System by:

- Taking overall responsibility and accountability of IMS management system and for the prevention of work – related injury and ill health as well as the provision of safe and healthy work places and activities **refer in Annex-IV**
- **Roles and responsibility**
- Ensuring that the IMS Policy and IMS Objective are established and are

compatible with the strategic direction and context of GNPGC **refer in section 5.2 IMS Policy & in section 6.2 IMS Objective**

- Ensuring the integration of IMS requirement into the GNPGC business process.
- Ensuring the resources needed to establish, implement, maintain and improve the Integrated Management System.
- Communicating the importance of effectiveness of the Integrated Management System and of conforming to the IMS management system requirement
- Ensuring that Integrated Management System achieves its intended outcomes.
- Directing and supporting persons to contribute to the effectiveness of the Integrated Management System.
- Ensuring action plan are approved and implemented **(ISO 50001:2018)**
- Ensuring resources are needed are available **(ISO 50001:2018)**
- Ensuring the formation of IMS Team (EnMS Team) **(ISO 50001:2018)**
- Communication the importance of effective energy management and conforming to IMS Requirement. **(ISO 50001:2018)**
- Ensuring and promoting continual improvement.
- Supporting, other relevant management roles to demonstrate their leadership as it applies to their area of responsibility.

5.2 IMS POLICY

Top management has established implemented and, maintained IMS policy with in the defined scope of its IMS systems are:

- Is appropriate to the purpose and context of GNPGC and supports its strategic direction.
- Includes a commitment to provide safe and healthy working condition for prevention of work –related injury and ill health

and Is appropriate to the purpose ,size and context of the GNP GC and to the specific nature of its IMS risk ,IMS opportunities, and the nature, scale and IMS impact of its activities, product and services;

- ☐ Provide a framework for setting IMS objectives and energy targets
- ☐ Include a commitment to ensure the availability of information and necessary resources to achieve objective and energy target;
- ☐ Including a commitment to the protection of the IMS, including prevention of the pollution and fulfillment of legal requirement and other requirement and specific commitment relevant to the context of GNP GC and related to energy efficiency, energy use and energy consumption.
- ☐ Include a commitment to fulfill its compliance obligation.
- ☐ Include commitment to eliminate hazard and reduce IMS risk (see 8.1.2)
- ☐ Include a commitment to continual improvement of the Integrated Management System to enhance IMS Performance and of energy performance
- ☐ Support design activities that consider energy performance improvement.
- ☐ Include a commitment to satisfy applicable requirements
- ☐ Include a commitment to consultation and participation of employees , and where they exist, employees 's representative

The IMS policy has:

- ☐ Documented in section no 5.2 of manual.
- ☐ Communicated with in the GNP GC through display, training and digital media source
- ☐ Available to all interested parties through website and catalogs/brochures
- ☐ Reviewed and updated at a defined frequency during MRM.

Responsibility:

- ☐ Top management
- ☐ IMS LEADER

QUALITY, ENVIORMENT, HEALTH AND SAFETY POLICY

GOVT. NEHRU PG COLLEGE will be the Leader teaching and learning activities in India by adopting best technology available across the globe and incorporating the IMS system. GNP GC is aware of its duties and responsibilities towards the quality of products and services on system design, Preserving environment, elememinating or reducing hazard to provide safety and health of our employees/workers and Interested Parties who are associated with us along with a consultation and participation. We are committed to continually improve our integrated management system by complying with all applicable statutory, legislative and regulatory requirements. It will be reviewed at periodic interval for its suitability

Approved by Principal

Date: 13/08/2021

ENERGY POLICY (EnMS)

We at GNPGC are committed to sustainable development in all its activities and processes. To accomplish this, we will make efforts to reduce energy cost. Our endeavor towards this goal will be as follows:

- ☐ **to reduce overall energy use and consumption by identifying and implementing energy conservation scheme in the processes, innovation and incorporating new energy efficient technologies & equipment;**
- ☐ **committed to continual improvement in energy performance and to ensure the availability of information and of necessary resources to achieve objectives and targets;**
- ☐ **committed to comply with applicable legal requirements and other requirements to which the BMF subscribes related to its energy use, consumption and efficiency;**
- ☐ **provides the framework for setting and reviewing energy objectives and targets and supports the purchase of energy-efficient products and services, and design for energy performance improvement;**
- ☐ **Policy is documented and communicated to all the Interested parties and is regularly reviewed, and updated as necessary.**

Approved by Principal**Date: 13/08/2021****5.3 GNPGC roles, responsibilities and authorities**

Top management has ensured assigned the responsibilities and authorities for all within the GNPGC and communicated at all levels through **GNPGC chart, and roles, responsibility and authority matrix** and maintained in annexure **II (GNPGC chart)** and **Annexure IV roles, responsibility and authority matrix)**

Employees at each level of the GNPGC has responsibility as aspects of the Integrated Management System over which they have control.

Top management appointed has appointed **IMS Team** and **(IMS LEADER) is appointed as a Safety leader.** Team has a responsibility to conform Integrated Management System meet the requirements of standard and reporting to top Management on the performance of the Integrated Management System

Document ref:

- ☐ Annexure II (GNPGC chart)
- ☐ Annexure IV (roles, responsibility and authority matrix)

Responsibility:

- ☐ Top management
- ☐ IMS LEADER
- ☐ All Employees

6.1 Actions to address risks and opportunities

6.1.1 When planning for the Integrated Management System , the GNPGC has considered issues referred in **4.1 (context)**, requirement referred in **4.2(interested parties)** and **4.3 (the scope of its Integrated Management System)** and determined risk and opportunities that needed to be addressed to

- ☐ Give assure that the Integrated Management System can achieve its intended result(s)
- ☐ Enhance desirable effects
- ☐ Prevent, or reduce undesired effects
- ☐ Achieve continual improvement
- ☐ The scope of its IMS management IMS System

During determining the risk and opportunities for Integrated Management System and its intended outcomes that need to be addressed, GNPGC has taken in account:

- ☐ Hazards (6.1.2.1)
- ☐ IMS risk (6.1.2.2)
- ☐ IMS opportunities and other opportunities (6.1.2.3)
- ☐ Legal requirement and other requirement (6.1.3)

The GNPGC has determined the risk and opportunities that are relevant to intended outcomes of the Integrated Management System, in case of planned change, permanent or temporary, assessment has undertaken before the change is implemented (8.1.3) The GNPGC has maintained documented information on:

- ☐ Risk and opportunities
- ☐ Process and action needed to determine and address its risk and opportunities to the extent necessary to have confidence that they are carried out as a planned.
- ☐ The risk and opportunities are determined are through the Severity factor and probability factor

Probability Factor

Probability	Low	Medium	High
Factor Score	1	2	3

Severity Factor

Severity	Negligible	Marginal	Critical	Catastrophic
Factor Score	1	2	3	4

- ☐ Risk level (Probability factor X severity Factor) :
- ☐ High: rating is 8-12 action required
- ☐ Medium: rating is 4-7 supported by additional process
- ☐ Low : rating is 1-3 No action required

Risk Factors

Issues (Internal / External)	Expected Result	Uncertainty	Severity	Probability	Total rating	Risk (H/M/L)	Opportunity	Control Point(s)
	Work	Existing	2	3	6	M	Opportunity	Provide

Competence	Force is competent	workforce not skilled					Ability to hire Skilled Team	training to existing employees
Space	Adequate space is provided	Space provided may not adequate	2	2	4	L	New Establishment	Acquire more space
Culture	Work Force is motivated	Unacceptable quality of work	2	2	4	L	Opportunity for managers to lead	To build strong organization culture
Equipment	equipment are usable	These may not work properly	2	3	6	M	Timely Maintenance	Timely maintenance of equipment
Legal/Regulatory Authority	Applicable requirements to be followed	Legal requirements not reviewed	3	3	9	H	Timely Review And Update	Identify and follow applicable legal

d
timelyrequire
m
ents and
update**6.1.1. Assessment of IMS opportunities and other opportunities for the Integrated Management System**

The GNPGC hasl establish, implement and maintain a process(es) to assess

a) : IMS opportunities to enhance IMS performance, while taking into account planned changes to the GNPGC, its policies, its processes or its activities and:

1) Opportunities to adapt work, work GNPGC and work environment to Employees;

2) Opportunities to eliminate hazards and reduce IMS risks;

b) Other opportunities for improving the Integrated Management System

6.1.2 IMS aspects (14001:2015)

Within the defined scope of the Integrated Management System , the GNPGC determines the IMS aspects of its activities and services that it can control and those that it can influence, and their associated IMS impacts, considering a life cycle perspective.

When determining IMS aspects, the GNPGC takes following in account:

- a) Change in existing testing technique /norms
- b) Abnormal conditions or emergency situation

The GNPGC determines those aspects that have or can have a significant IMS impact through defined criteria. These significant aspects are informed to all within the GNPGC.

Significant IMS aspects can result in risks and opportunities associated with either adverse IMS impacts (threats) or beneficial IMS impacts (opportunities). The GNPGC identified the controls proportionate to the potential impact on the conformity of products,

services and processes that address these risks and opportunities; and evaluates the effectiveness of these actions.

Options to address risks/aspect can include

- a) Impact of the identified risks/opportunities and aspects
- b) Taking risk in order to pursue an opportunity,
- c) eliminating/control the risk/aspect source,
- d) Changing the likelihood or consequences,
- e) Sharing the risk,
- f) Retaining risk by informed decision.

Opportunities can lead to the

- a) Adoption of new technology,
- b) Increase in performance reliability
- c) Using new technology and other desirable and viable possibilities to address the GNP GC's or its Customer s' needs.

Document ref:

Annexure V

Responsibility:

- ☐ Top management
- ☐ IMS LEADER
- ☐ IMS Team

6.1.3 Compliance obligations and determination of legal and other requirement

The GNP GC has established, implement and maintained a process to:

- a) Determine and have access to the compliance obligations/up to date legal requirement and other requirement related to its hazards, IMS risk and Integrated Management System .
- b) Determined these compliance obligations/ legal requirement and other requirement apply to the GNP GC and communicated ,
- c) Take this compliance obligations/up to date legal requirement and other requirement into account when establishing, implementing, maintaining and continually improving its Integrated Management System

The GNP GC has maintained and retains documented information of its compliance obligations/ legal requirement and other requirement and updated if change required.

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- ☐ Legal Review register
- ☐ NOCs

6.1.4 Planning action

The GNPGC plans:

a) to take actions to address its:

- 1) Significant IMS aspects;
- 2) Compliance obligations/legal and other requirement; Risk and opportunities

Prepare and respond to emergency situation

Roles and responsibility is defined during and planning and review and evaluate at a defined frequency in MRM.

Reference Documents:

- ☐ Risk Analysis
- ☐ Aspect & Impact
- ☐ Emergency preparedness and response

Responsibility:

- ☐ Top management
- ☐ IMS LEADER
- ☐ IMS Team

6.2 IMS objectives and planning to achieve them

6.2.1 The GNPGC has established IMS Objectives at relevant functions, levels and processes needed for the Management System.

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The objectives are:

- a) In line with the IMS Policy
- b) Measurable
- c) Take into account

▫ Applicable requirements

- Result of the assessment of the risk and opportunities
- Result of the consultation with Employees and where they exist employee's representative.

- d) Monitored at defined frequency
- e) Communicated to the team
- f) Updated From Time To Time

OBJECTIVE:

1. **HR:** To Provide Awareness Training to All Employees in Every Three Months related to IMS.
2. **COMPLAINT :** To Reduce students Complaint max 2 in a quarter
3. **LEGAL :** 100% legal compliance
4. **Electrical Energy:** Reduce Electrical energy consumption upto 3 % from previous year.
5. **Paper:** minimize the consumption of paper upto 10% per year
6. **Personal Safety:** Zero illness for interested parties along with workers
7. **Energy:** Reduce the overall consumption of energy 3% as compared to previous Year

6.2.2 Planning to achieve IMS Objectives, GNPGC ensures to determine the following for achievement of objectives:

- a) What will be done;
- b) What resources will be required;
- c) Who will be responsible;
- d) When it will be completed;

- e) How the results will be evaluated.
- f) How the action to achieve IMS objective will integrate into the GNPGC business process.

Reference document:

- ☐ Objective Monitoring Sheet
- ☐ Management programs
- ☐ MRM Minutes

6.3 Energy review (EnMS)

GNPGC develop and conduct an energy review.

To develop the energy review, GNPGC is:

a)analyse energy use and consumption based on measurement and other data, i.e.:

- 1)Identifying current types of energy
- 2)evaluating past and current energy use(s) and consumption; b) based on the analysis, identify SEUs

c) for each SEU:

- 1)determining relevant variables;
- 2)Determining current energy performance;
- 3)identifying the person(s) doing work under its control that influence or affect the SEUs;

d)determining and prioritize opportunities for improving energy performance;

e)estimating future energy use(s) and energy consumption.

The energy review updated at defined intervals, as well as in response to major changes in facilities, equipment, systems or energy-using processes.

GNPGC maintain as documented information (see 7.5) the methods and criteria used to develop the energy review, and retain documented information of its results.

Ref: Identification and review of energy saving

opportunities En-P-01

6.4 Energy Performance Indicators (EnMS)

GNPGC determined EnPIs that:

- a) are appropriate for measuring and monitoring its energy performance;
- b) enable the GNPGC to demonstrate energy performance improvement. The method for determining and updating the EnPI(s) is maintained as documented information. Where GNPGC has data indicating that relevant variables significantly affect energy performance, GNPGC consider such data to establish appropriate EnPI(s).

EnPI value(s) is reviewed and compared to their respective EnB(s), as appropriate. GNPGC retain documented information of EnPI value(s).

6.5 Energy Baseline (EnMS)

GNPGC has established Energy Baseline (EnB) using the information from the energy reviews, taking into account a suitable period of time.

Where GNPGC has data indicating that relevant variables significantly affect energy performance, the GNPGC is carrying out normalization of the EnPI value and corresponding EnB.

EnB will be revised in the case of one or more of the following:

- a) EnPI(s) no longer reflect the GNPGC 's energy performance;
- b) there have been major changes to the static factors;
- c) According to a pre-determined method.

6.6 Planning for collection of energy data (EnMS)

GNPGC ensured that key characteristics of its operations affecting energy performance are identified, measured, monitored and analysed at planned intervals (see 9.1). GNPGC define and

implement an energy data collection plan appropriate to its size, its complexity, its resources and its measurement and monitoring equipment. The plan specify the data necessary to monitor the key characteristics and state how and at what frequency the data is be collected and retained.

Data is collected (or acquired by measurement as applicable) and retained documented information is included:

- a) the relevant variables for SEUs;
- b) energy consumption related to SEUs and to GNP GC ;
- c) operational criteria related to SEUs;
- d) static factors, if applicable;
- e) data specified in action plans.

The energy data collection plan is reviewed at defined intervals and updated as appropriate

GNP GC ensured that the equipment used for measurement of key characteristics provides data which are accurate and repeatable. GNP GC retain documented information on measurement, monitoring and other means of establishing accuracy and repeatability.

7.1 Resources

The GNP GC has determined and provided the resources needed for the establishment, implementation, maintenance and continual improvement of Integrated Management System

Reference documents:

- List of equipment's

7.2 Competence

The College has:

- a) Determined the necessary competence of employees through skill evaluation of person(s) doing work under its control that affects the performance and effectiveness of the Integrated Management System and its effect in energy Performance

- b) Ensured that these persons are competent on the basis of appropriate education, training, or experience.
- c) Identified the training needs and types of training.
- d) Provision of training.
- e) Evaluated the training effectiveness.
- f) Appropriate evidence/records of above are maintained.

Reference Documents:

- ☐ Employees' records
- ☐ Training records
- ☐ Competence records

7.3 Awareness

The GNP GC ensures that persons doing work under the GNP GC's control are aware of:

- a) The IMS policy & relevant IMS Objectives
- b) Their contribution to the effectiveness of the IMS Management System, including the benefits of improved performance
- c) The implications and potential consequences of not conforming to the IMS requirements
- d) Incident and the other outcomes of investigations that are relevant to them
- e) Hazards, IMS risk and action determined that are relevant to them.
- f) The ability to remove themselves from work situation that they consider present imminent and serious danger to their life or health, as well as the arrangements for protecting them from undue consequences for doing so

The awareness Methods includes the following: -

- a) Ongoing Training system
- b) Involvement of people during the planning and periodic review
- c) Information available during work done

Reference Documents:

- Training Record

. 7.4 Communication

The GNPGC must decide what, when, with whom and how to communicate both internally and externally. Problems may arise due to incomplete, ambiguous or inaccurate information being transmitted; transmission to the wrong person, too late or at the wrong time; use of inappropriate or unreliable media, etc.

Communication by the **IMS LEADER** on the effectiveness of the IMS must not only take place at the top management level but also at appropriate levels within the GNPGC. All process owners as well as their personnel receive periodic feedback on their areas of responsibility.

The GNPGC has a defined system for external or internal communication. Following communication channels as Annexure 7.4 (Internal and external communication) are used:-

What	When	with whom	How	Who
INTERNAL COMMUNICATION				
		All Employees	Display /	

IMS policy	Permanent	/	Letter /	Manag e ment
		Intereste d parties	Training	
Importanc e Of	As per Training plan / during			
effective IMS	Orientation Training	All Employee s	Training / Display	Manag e ment
Responsibi li Ties	During recruitment / Promotion /		Procedure / Oral /	
		Employee		Manag e

7.5 Documented Information**7.5.1 General**

The Integrated Management System includes:

- Documented information required by ISO 9001:2015 , ISO 14001:2015 & ISO 50001:2018 Standard;
- Documented information determined by the GNPGC as being necessary for the effectiveness of the identified processes of IMS

Documented information needed to be maintained for the purposes of establishing a Quality includes:

- Scope of the Integrated Management System
- Documented information necessary to support the operation of processes
- IMS policy
- IMS objectives

7.5.2 Creating and updating

When creating and updating documented information, it is ensured that:

- a) Identification and description of documented information is adequate. This includes that following:-
 - Document Title
 - Document Unique Reference No. S
 - Issue No. & Date
 - Revision No. & Date
 - Review & approval authority
- b) Format and media used to keep these documented information.
- c) Review and approval of documented information before release by competent authority.
- d) Review and approval is traceable, i.e. it must be clear who performed it.

7.5.3 Control of documented information

7.5.3.1 Documented information required by the Integrated Management System and by

IMS Standard is controlled to ensure that:

- a) It is available and suitable for use, where and when it is needed
- b) It is adequately protected (e.g. from loss of confidentiality, improper use, or loss of integrity).

7.5.3.2 For the control of documented information, following system is developed:

- a) Availability
- b) Storage
- c) Preservation
- d) Distribution
- e) Protection
- f) Disposition
- g) Change control
- h) Retention
- i) Documented information of external origin determined by the GNPGC to be necessary for the planning and operation of the Quality is identified as appropriate, and controlled.

- j) Documented information retained as evidence of conformity is protected from unintended alterations.

Reference Documents:

- Master List of Documents and Records

Responsibility:- Top management, IMS Leader

8.1 Operational planning and control**8.1.1 General:**

The GNPGC has planned, implement, control and maintain the processes needed to meet requirements of the Integrated Management System, and to implement the actions determined in Clause 6, by:

- a) Establishing criteria for the processes;
- b) Implementing control of the processes in accordance with the criteria;

The GNPGC has ensured that outsourced processes are controlled or influenced. The type and extent of control or influence to be applied to the process (es) has defined within the Integrated Management System.

Consistent with a life cycle perspective, the GNPGC has :

- establish controls, as appropriate, to ensure that its IMS requirement(s) is (are) addressed in the design and development process for the service, considering each life cycle stage;
- establishing criteria for the processes, including the effective operation and maintenance of facilities, equipment, systems and energy-using processes, where their absence can lead to a significant deviation from intended energy performance;
- determine its IMS requirement(s) for the procurement of products and services, as appropriate;

- ☐ communicate its relevant IMS requirement(s) to external providers, including contractors;
- ☐ Consider the need to provide information about potential significant environmental impacts associated with the transportation or delivery, use, end-of-life treatment and final disposal of its products and services.

c) Maintaining and retaining documented information to the extent necessary to have confidence that the processes have been carried out as planned;

d) Adapting work to Employees. At multi-employer workplaces, the GNPGC has coordinated the relevant parts of the Integrated Management System with the other GNPGCs.

Reference document:

- ☐ List of outsource process

8.2 a) Requirements for services (QMS)**8.2.1 Customer communication**

Communication with Customer s is include

- a) Providing information relating to product
- b) Handling enquiries, requirement, including changes
- c) Obtaining Customer feedback relating to product, including Customer complaints
- d) Handling or controlling Customer property
- e) Establishing specific requirements for contingency actions, when relevant

8.2.2 Determining the requirements related to product

When determining the requirements for the product to be offered to Customer s, the GNPGC shall ensure that:

- a) The requirements for the product are defined, including:
 - 1) Any applicable statutory and regulatory requirements;
 - 2) Those considered necessary by the GNPGC;

- b)The GNPGC can meet the claims for the products and services it offers.

8.2.3 Review of requirements related to services

8.2.3.1 The GNPGC shall ensure that it has the ability to meet the requirements for product to be offered to Customer s. The GNPGC shall conduct a review before committing to supply product to a Customer, to include:

- a)Requirements specified by the Customer, including the requirements for delivery and post-delivery Activities;
- b)Requirements not stated by the Customer, but necessary for the specified or intended use, when known;
- c)Requirements specified by the GNPGC;
- d)Statutory and regulatory requirements applicable to the services;
- e) Contract or requirements differing from those previously expressed.

The GNPGC shall ensure that contract or requirements differing from those previously defined are resolved.

The Customer's requirements shall be confirmed by the GNPGC before acceptance, when the Customer does not provide a documented statement of their requirements.

8.2.3.2 The GNPGC shall retain documented information, as applicable:

- a)On the results of the review;
- b)On any new requirements for the products and services.

8.2.4 Changes to requirements for products and services

The GNPGC shall ensure that relevant documented information is amended, and that relevant Persons are made aware of the changed requirements, when the requirements for product are changed.

Procedure Ref: Customer Complaint

8.2 Design (EnMS)

GNPGC considers energy performance improvement opportunities and operational control in the design of new, modified and renovated facilities, equipment, systems and energy-using processes that can have a significant impact on its energy performance over the planned or expected operating lifetime.

GNPGC retains documented information of the design activities related to energy performance

8.3 Procurement (EnMS)

GNPGC established and implemented criteria for evaluating energy performance over the planned or expected operating lifetime, when procuring energy using products, equipment and services which are expected to have a significant impact on GNPGC 's energy performance.

When procuring energy using products, equipment and services that have, or can have, an impact on SEUs, GNPGC informs suppliers that energy performance is one of the evaluation criteria for procurement.

Where applicable, GNPGC defines and communicates specifications for:

- a) Ensuring the energy performance of procured equipment and services;
- b) the purchase of energy

Ref: Procedure for Purchase, Design, Modification. En-P-11

8.3 Design and development of product:

8.3.1 General

GNPGC has got a separate department functioning in the guidance of Quality Person.

8.3.2 Design & Development planning

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- a) The nature, duration and complexity of the D & D activities;
- b) The required process stages, including applicable development reviews
- c) The required development verification and validation activities;
- d) D & D department is responsible for the R & D activities for product and Productions in consultation with the MD .
- e) The internal and external resource needs for the development of products;
- f) The need to control interfaces between Persons involved in the D & D process;
- g) The need for involvement of customers and users in the D & D process;
- h) The requirements for subsequent provision of products and services;
- i) The level of control expected for the development process by customers and other relevant interested parties;

8.3.3 Design & Development inputs

GNPGC has determined the requirements essential for Product developed. GNPGC has considered:

- a) Technical requirements
- b) Customer specification
- c) Statutory and regulatory requirements;
- d) Functional requirements are received from the customers. Product is prepared based on these information's. The inputs are reviewed and ambiguities are resolved internally as well as with customer if necessary.
- d) GNPGC standard;
- e) Potential consequences of failure due to the nature of the products and services. GNPGC ensure that D & D inputs are adequate, complete and unambiguous. Conflicting development inputs shall be resolved.

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8.3.4 Design & Development controls

GNPGC has applied controls to the development process to ensure that:

- a) The results to be achieved are defined;
- b) Reviews are conducted to evaluate the ability of the results of development to meet requirements;
- c) Verification activities are conducted to ensure that the development outputs meet the input requirements;
- d) Validation activities are conducted to ensure that the resulting products meet the requirements for the specified application or intended use;
- e) Any necessary actions are taken on problems determined during the reviews, or verification and validation activities;

8.3.5 Design & Development outputs

GNPGC ensure that D & D outputs:

- a) Meet the input requirements;
- b) Are adequate for the subsequent processes for the provision of products and services;
- c) Include or reference monitoring and measuring requirements, as appropriate, and acceptance criteria;
- d) Specify the characteristics of the products that are essential for their intended purpose and their safe and proper provision.

8.3.6 Design & Development changes

GNPGC identify, review and control changes made during, or subsequent to, development of products, to the extent necessary to ensure that there is no adverse impact on conformity to requirements.

GNPGC retain documented information on:

- a) Development changes;
- b) The results of reviews;
- c) The authorization of the changes;
- d) The actions taken to prevent adverse impacts.

Document ref: Design and development records

8.4 Control of externally provided processes, and services

8.4.1 General

Externally provided processes, product & services include:

- a) Product & Services required from a supplier
- b) Outsourcing processes to an external provider

The GNPGC has established a process to ensure that externally provided processes product & services conform to requirements.

The GNPGC determines the controls to be applied to externally provided processes, products and services. The GNPGC has determined and applied criteria for:

- a) Evaluation of suppliers
- b) Selection of suppliers
- c) Monitoring of Performance of suppliers and
- d) Re-evaluation of external providers

The documented information of these activities and any necessary actions arising from the evaluations are retained.

8.4.2 Type and extent of control

It is ensured that externally provided processes, product & services do not adversely affect the GNPGC's ability to consistently deliver best in class products to the Customer.

The GNPGC has established sufficient controls to:

- a) Ensure that externally provided processes and products remain within the control of its Quality and having not adverse effect on environment
- b) Define both the controls that it intends to apply to an external provider and those it intends to apply to the resulting output
- c) Take into consideration:
 - i. The potential impact of the externally provided processes, services on the GNPGC's ability to consistently meet Customer and applicable statutory and regulatory requirements
 - ii. The effectiveness of the controls applied by the external provider

- c) Determine the verification, or other activities, necessary to ensure that the externally provided processes, services meet requirements.

8.4.3 Information for external providers

The GNPGC shall ensure the adequacy of requirements prior to their communication to the external provider.

The GNPGC shall communicate to external providers its requirements for:

- a) the processes, services to be provided;
- b) the approval of:
 - 1) Products and services;
 - 2) Methods, processes and equipment;
 - 3) The release of products and services;
- c) competence, including any required qualification of Persons;
- d) the external providers' interactions with the GNPGC;
- e) control and monitoring of the external providers' Performance to be applied by the GNPGC;
- f) Verification or validation activities that the GNPGC, or its Customer, intends to perform at the external providers' premises.

Document ref:

Supplier performance evaluation

- ☐ Approved supplier list

8.5 Production and service provision

8.5.1 Control of production and service provision

The GNPGC has implemented production and service provision under controlled conditions. Controlled conditions include, as applicable:

- a) The availability of documented information that defines:
 - 1) The characteristics of the products to be produced, the services to be provided, or the activities to be performed

- 2) The results to be achieved
- b) The availability and use of suitable monitoring and measuring resources
- c) The implementation of monitoring and measurement activities at appropriate stages to verify that criteria for control of processes or outputs, and acceptance criteria for products and services, have been met
- d) The use of suitable infrastructure and environment for the operation of processes
- e) The appointment of competent Persons, including any required qualification
- f) The validation, and Periodic revalidation, of the ability to achieve planned results of the processes for production and service provision, where the resulting output cannot be verified by subsequent monitoring or measurement
- g) The implementation of actions to prevent human error
- h) The implementation of release, delivery and post-delivery activities.

8.5.2 Identification and traceability

The organisation identifies, where appropriate, the Daily production by suitable means throughout product realization

Traceability is maintained through the production records on daily basis.

Reference:

Production records

8.5.3 Property belonging to Customer or external providers

The GNP GC shall exercise care with property belonging to Customer s or external providers while it is under the GNP GC's control or being used by the GNP GC. The GNP GC shall identify, verify, protect and safeguard Customer s' or external providers' property provided for use or incorporation into the products and services. When the

property of a Customer or external provider is lost, damaged or otherwise found to be unsuitable for use, the GNPGC shall report this to the Customer or external provider and retain.

Documented information on what has occurred.

Reference:

External origin document

8.5.4 Preservation

The GNPGC shall preserve the result of test performed to the extent Necessary to ensure conformity to requirements.

8.5.5 Post-delivery activities

The GNPGC shall meet requirements for post-delivery activities associated with the service.

In determining the extent of post-delivery activities that are required, the GNPGC shall consider:

- a) Statutory and regulatory requirements;
- b) The potential undesired consequences associated

with its services; c) The nature, use and intended
prime of its services;

Customer requirements;

d)Customer feedback.

8.5.6 Control of changes

The GNPGC reviews and control changes for service provision, to the extent necessary to ensure continuing conformity with requirements. The GNPGC retains documented information describing the results of the review of changes; MD is authorized for change, and any necessary actions arising from the review.

8.6 Release of services

The GNPGC implements planned arrangements, at appropriate stages, to verify that the Customer requirement has met. The release of Product to the Customer is not proceeding until the planned arrangements (final inspection) have been satisfactorily completed, unless otherwise approved by a relevant authority and, as applicable, by the Customer. The GNPGC retains documented information on the release of product

The records include:

- a) Evidence of conformity with the acceptance criteria (final test reports)
- b) Traceability to the Person(s) authorizing the release (signing authority)

8.7 Control of nonconforming outputs

8.7.1 The GNPGC ensures that outputs that do not conform to their requirements are identified and controlled to prevent their unintended use or delivery. The GNPGC identifies and quarantines the products and takes appropriate action based on the nature of the nonconformity and its effect on the conformity of services. This also applies to nonconforming services detected after delivery of products, during or after the provision of services. The GNPGC deals with nonconforming outputs in one or more of the following ways:

- a) Correction
 - b) Segregation, containment, return or suspension of provision of products and services
 - c) Informing the Customer
 - d) Obtaining authorization for acceptance under concession.
- Conformity to the requirements shall be verified when nonconforming outputs are corrected.

8.7.2 The GNPGC retains the documented information that:

- a) Describes the nonconformity
- b) Describes the actions taken

- c) Describes any concessions obtained
- d) Identifies the authority deciding the action in respect of the nonconformity.

Procedure Reference: control of Non-conforming product

9.1 Monitoring, measurement, analysis and evaluation

9.1.1 General

Monitoring and measurement of process is done:

- a) To determine and establish capability of new processes to conform to requirements.
- b) To monitor these processes over time to verify ongoing stability and capability to meet requirements.
- c) To determine and achieve levels of continual improvement.

The GNPGC determines:

- a) What needs to be monitored and measured in respect to Integrated Management System?
- b) The method for monitoring, measurement, analysis and evaluation needed to ensure valid results.
- c) The frequency of monitoring and measuring.
- d) Analysis and evaluation results of the monitoring and measurement.

The evaluation of the performance and the effectiveness of the Integrated Management System done through:-

- a) Internal Audit
- b) Data analysis
- c) Customer feedback/complaints
- d) IMS Objectives

The GNPGC retains appropriate documented information as evidence of the results.

9.1.2 Evaluation of Compliances

The GNPGC has establish, implement and maintained a process (es) for evaluating compliance with legal requirements and other requirements

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The GNPGC has

- a) Determined the frequency and Method(s) for the evaluation of compliance;
- b) Evaluate compliance and take action if needed
- c) Maintain knowledge and understanding of its compliance status with legal requirements and other requirements;
- d) Retain documented information of the compliance evaluation result(s).

The GNPGC has retains documented information as evidence of the compliance evaluation results.

A summary of performance data must be included in periodic management review.

Reference Documents:

- ☐ legal review register :
- ☐ NCR records
- ☐ CAR

9.2 Internal Audit

9.2.1 The GNPGC conducts internal audits to provide information on whether the

Integrated Management System conforms to:

- ☐ Annual Audit schedule is prepared by IMS LEADER on basis of importance of activity to be checked including any unresolved non-conformity of previous audit and is conducted on a frequency of one year in such a way that each area is covered.
- ☐ Internal auditors could be selected internally or externally for conducting the audits. Any internal auditor shall not audit his own deptt. Third party audits are also acceptable.
- ☐ IMS Leader shall discuss with the appointed auditor and auditee and shall prepare the —Internal Audit Schedule|| The Internal Audit Schedule is circulated to the auditee to ensure their availability on the respective dates.
- ☐ Internal audits are organized and carried out through auditors.

- ☐ In case of any Non - Conformity of the System; —NC Report is issued by auditor. Auditee shall review NCR's and take corrective/Preventive action within acceptable time period to the auditor. Constraints of resource required shall be put in Management Review.
- ☐ Corrective action taken shall be verified and the auditor shall close NCR within the agreed time frame.
- ☐ IMS LEADER prepares Internal Audit Summary of audit conducted is prepared based on NCR's and review is presented in Management Review.
- ☐ Changes in any implemented system, as a consequence of NCR's are implemented with a view to remove deficiencies in the management system.

Process Input	Process Output	Responsibility
Integrated Management	- Internal Audit Schedule	IMS Leader
System Audit	- NCR report	
	- Internal Audit Summary	

Process – Internal Audit**Document ref**

Internal audit plan
Internal audit schedule
Internal audit Summary
Non-conforming records
CAR

9.3 Management Review

The management reviews the Integrated Management System to ensure its continuing suitability, adequacy,

effectiveness and alignment with the strategic direction of the GNPGC

- ☐ Management Review Meeting (MRM) shall be conducted Once in a year preferably after closer of noncompliance observed during Internal Audit.
- ☐ The review meeting shall be coordinated by IMS Leader and chaired by the MD.
- ☐ All departmental heads shall take part in the review meeting. IMS Leader shall inform (Date, Time, Venue and Agenda) to all the members through Agenda of Meeting before one week of review meeting.
- ☐ The agenda for Management Review Meeting shall be as follows:-
 - a) The status of actions from previous management reviews
 - b) Changes in
 - ☐ External and internal issues that is relevant to the Integrated Management System.
 - ☐ Need and expectation of the interested parties , including compliance obligations;
 - ☐ its significant environmental aspects;
 - ☐ risks and opportunities;
 - ☐ legal requirements and other requirements;
 - c) the extent to which the IMS policy and the IMS objectives & Energy target have been met;
 - d) information on the IMS performance, including trends in
 - 1) Incidents, nonconformities, corrective actions and continual improvement;
 - 2)Monitoring and measurement results;
 - 3) Fulfillment of its compliance obligation and Results of evaluation of compliance with legal requirements and other requirements;
 - 4)audit results;
 - 5)Consultation and participation of Employees;
 - 6)Risks and opportunities;
 - 7) Customer satisfaction and feedback

- 8) Process performance and conformity of product and services
 - 9) Performance of external providers
 - 10) IMS Policy
- e) Energy Performance & energy performance improvement based on monitoring and measurement result including the EnPI
- e) Adequacy of resources;
 - f) Relevant communication(s) from interested parties, including complaints;
 - g) Opportunities for continual improvement.

Management review meeting result action related:

- a) the continuing suitability, adequacy and effectiveness of the Integrated Management System in achieving its intended outcomes;
- b) continual improvement opportunities;
- c) IMS Policy
- d) The EnPI Or EnB
- e) any need for changes to the Integrated Management System ;
- f) resources needed;
- g) actions, if needed when IMS objectives,IMS Target,action plan have not been achieved;
- h) Opportunities to improve integration of the Integrated Management System with other business processes and to improve energy performance.
- i) any implications for the strategic direction of the GNP GC

IMS LEADER shall maintain the minutes of the Management Review Meeting in format.

This record shall be retained for a minimum period of three years.

4.7.1 The action requirement arising out of the meetings are forwarded to concerned department for necessary action.

5.0 Process – Management Review Meeting

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Process Input	Process Output	Responsibility
MRM Agenda	MRM Minutes Record (Output)	IMS Leader /Top Management.

Procedure ref:

- ☐ Procedure for MRM

Document ref:

- ☐ Agenda MRM
- ☐ MRM Minutes Records

Responsibility:

- ☐ Top management
- ☐ IMS Leader.
- ☐ Dept Head

10.1 General

The GNPGC has determined opportunities for improvement and implements necessary actions to achieve the intended outcomes of its Integrated Management System.

10.2 Incident, Nonconformity and corrective action

The GNPGC shall establish, implement and maintain a process (es), including reporting, investigating and taking action, to determine and manage incidents and nonconformities.

When an incident or nonconformity occurs, the GNPGC shall:

- a) React in a timely manner to the incident or nonconformity and, as applicable:
 - 1) Take action to control and correct it;
 - 2) deal with the consequences;
- b) Evaluate, with the participation of Employees (see 5.4) and the involvement of other relevant interested parties, the need for

corrective action to eliminate the root cause(s) of the incident or nonconformity, in order that it does not recur or occur elsewhere, by:

- 1) Investigating the incident or reviewing the nonconformity;
 - 2) Determining the cause(s) of the incident or nonconformity;
 - 3) Determining if similar incidents have occurred, if nonconformities exist, or if they could potentially occur;
 - c) review existing assessments of IMS risks and other risks, as appropriate (see 6.1);
 - d) determine and implement any action needed, including corrective action, in accordance with the hierarchy of controls (see 8.1.2) and the management of change (see 8.1.3);
 - e) Assess IMS risks that relate to new or changed hazards, prior to taking action
 - f) Review the effectiveness of any action taken, including corrective action;
 - g) Make changes to the Integrated Management System, if necessary.
- Corrective actions shall be appropriate to the effects or potential effects of the incidents or nonconformities encountered.

The GNPGC shall retain documented information as evidence of:

- The nature of the incidents or nonconformities and any subsequent actions taken;
- The results of any action and corrective action, including their effectiveness.

The GNPGC shall communicate this documented information to relevant Employees, and, where they exist, Employees' representatives, and other relevant interested parties

Reference documents:

- ☐ Incident Records
- ☐ Near Miss Report
- ☐ CAR

Responsibility:

- ☐ Top management

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- ☐ IMS Leader
- ☐ Plant supervisor

10.3 Continual improvement

The GNPGC continually improves the suitability, adequacy and effectiveness of the Integrated Management System.

The GNPGC considers the results of analysis & evaluation, and the outputs from Management Review, to determine if there are needs & opportunities that has be addressed as a part of continual improvement.

Reference documents:

- ☐ MRM Minutes Records

Responsibility:

- ☐ Top management
- ☐ IMS Team
- ☐ IMS Leader.

Where applicable, the results of the energy performance consideration is incorporated into specification, design and procurement activities.

<p>AUDIT REPORT <i>ISO 50001:2018 (EnMS)</i></p>

INTERNAL AUDIT REPORT

**AUDITED ORGANISATION: GOVERNMENT NEHRU
P. G. COLLEGE, DONARGARH, AND DISTT.
RAJINGAON(CG)**

AUDIT REPORT

ISO 50001:2018 (EnMS)

Name of the Organization	GOVERNMENT NEHRU P. G. COLLEGE	
Address	DONARGARH, DISTT. RAJINGAON- 491445, CHHATTISGAR, INDIA	
Scope	:- “PROVISION FOR QUALITY ASSURANCE IN HIGHER EDUCATION, ARTS, SCIENCE AND COMMERCE.”	
Audit Team	Nitin	
Date of Audit	23.10.2021	
Brief about the organization	Post Graduate College	

Energy Management System ISO 50001:2018

Number of Sites to be Audited? ☐ Single

Annual Energy Consumption=

Number of energy Sources= One CEB

Number of significant energy uses (SEUs) = Not very high energy consumers, except- Air conditioners

ISO 50001:2018 EnMS Requirements	C/O/NCR	Comments
4.1 Understanding the organization and its context	C	Ref .No. GNPGC-IMSM-01 Rev-00, Issue-2, Page No-23 Verified with IMS leader
4.2 Understanding the needs and expectations of interested parties	C	Ref .No. GNPGC-IMSM-01 Rev-00, Issue-2, Page No-25
4.3 Determining the scope of the energy management system	C	Ref .No. GNPGC-IMSM-01 Rev-00, Issue-2, Page No-27
4.4 Energy management system	C	Ref .No. GNPGC-IMSM-01 Discribed in IMS manual Implementantation verified with Team leader-IMR
5.1 Leadership and commitment	C	Principial is head of the institute, committed for maintainance of EnMS committement reflected in CL-5.1 of IMSM

AUDIT REPORT
ISO 50001:2018 (EnMS)

ISO 50001:2018 EnMS Requirements	C/O/NCR	Comments
5.2 Energy policy	C	Very well designed, documented in IMS manual at page-32, displayed and understud by staff.
5.3 Organization roles, responsibilities and authorities	C	All staff members are well aware of roles and responsibilities, discussed in manual-P no.32
6.1 Actions to address risks and opportunities	C	Addressed in manual –Page-33 & 34 all aspects were covered.
6.2 Objectives, energy targets and planning to achieve them	C	Verified with IMR as documented on page no.38/39 of manual
6.3 Energy review	C	As planned done by IMR
6.4 Energy performance indicators	C	EPI- varies with respect to college curriculum, as the strength of students chanegs
6.5 Energy baseline	C	Base line calculated on the basis of averaging the monthly consumption of power. Manual-page no-41
6.6 Planning for collection of energy data	C	GNPGC ensured that the equipment used for measurement of key characteristics provides data which are accurate and repeatable. Energy data is collected on monthly basis, as bills are produced by electricity board.
7.1 Resources	C	Adequate resources are available, to fulfil the requirements.

AUDIT REPORT
ISO 50001:2018 (EnMS)

ISO 50001:2018 EnMS Requirements	C/O/NCR	Comments
7.2 Competence	C	<p><i>Determined the necessary competence of employees through skill evaluation of person(s) doing work under its control that affects the performance and effectiveness of the Integrated Management System and its effect in energy Performance</i></p> <p><i>Ensured that these persons are competent on the basis of appropriate education, training, or experience.</i></p> <p>Job Profile- F607</p>
7.3 Awareness	C	<p>Training was given to responsible persons and HOD's for EnMS, by external consultant, on 14th Augst 21, Training Record F-611</p> <p>Training Effectiveness- F-612</p>
7.4 Communication	C	<p>Its generally by-E-mails, cell phones, meetings, training etc.</p>
7.5 Documented information 7.5.1 General 7.5.2 Creating and updating 7.5.3 Control of documented information	C	<p>Good documentation done as they have QMS &EMS certifications already, now they are going for EnMS. – Total -20 SOP's</p>
8.1 Operational planning and control	C	<p>Operation planing and control- MR /SOP-13 evident</p> <p>Emergency Preparedness- MR/SOP-07</p>

AUDIT REPORT
ISO 50001:2018 (EnMS)

ISO 50001:2018 EnMS Requirements	C/O/NCR	Comments
8.2 Design	C	Not very much planned as the college is affiliated by University, courses are designed by University but teaching process is designed by teaching staff and administration
8.3 Procurement	C	There were no procurements for energy, in last one year, due to Covid-19, college remained closed for most of the time.
9.1 Monitoring, measurement, analysis and evaluation of energy performance and the EnMS 9.1.1 General 9.1.2 Evaluation of compliance with legal requirements and other requirements	Obs	M&M are done by administration, no control was observed to reduce the energy consumption
9.2 Internal audit	C	Last internal audit conducted on 10.09.2021, by external auditor, verified following records- AUDIT PLAN-F601, AUDIT SCHEDULE- F602, INTERNAL AUDIT SUMMARY-F604, NON CONFORMITY RECORDS F605 Internal Audit Procd-MR/SOP/06
9.3 Management review	C	Last MRM conducted on 25.09.2021, chaired by Principal, all agenda points of IMS were discussed, verified record of MRM- F- 608-Management Review Procd.MR/SOP-05
10.1 Nonconformity and corrective action	Obs	CORRECTIVE ACTION REQUEST FORM- F-803, No records of CA & PA were

<p style="text-align: center;">AUDIT REPORT ISO 50001:2018 (EnMS)</p>

ISO 50001:2018 EnMS Requirements	C/O/NCR	Comments
		available
10.2 Continual improvement	C	Its visible

Summary of Audit

College is already having ISO-9001:2015 & ISO 14001:2015 certificates and NAAC accreditation, It is positive status, that they have team of experienced staff and teachers, who can implements and maintain Energy management system in the college easily, during virtual audit it was observed, staff needs more orientation for EnMS for proper inducting it in integration with other management systems. EnMS team should spread the message of energy conservation in the college staff and students.



**GOVT. NEHRU P. G.
COLLEGE DONGARGARH**

**DISTT. RAJANNDGAON
(CHHATISGARH)**

ACADEMIC & ADMINISTRATIVE

AUDIT REPORT

(YEAR: 2020-21)



**कार्यालय प्राचार्य, शासकीय नेहरू स्नातकोत्तर महाविद्यालय
डोंगरगढ़, जिला राजनांदगाँव (छ.ग.)**

E-mail ID - collegedgg@gmail.com , Website - www.gnpgcollege.com ☎: 07823-233885

Accredited by NAAC with Grade "B" (CGPA - 2.21)

S.NO.858.....

Date : 21-8-2021

TO WHOM SO EVER IT MAY CONCERN

This is to certify that the team comprising of Dr. T.S.Thakur, Principal Govt. Awanti bai college Ramatola C.G., Dr. A.K.Dhurwe, Principal Govt. Kunjbihari choubey college Lal Bahadur nagar C.G., Dr. Sushma choure, Principal Govt. Suaryamukhi Davi college Chhuria C.G., helped the principal Dr.K.L.Tandekar and his staff to do the Academic & Administrative Audit (AAA) of Govt. Nehru P. G. College Dongargarh C.G.

Date-

Dr. T.S.Thakur
principal
Govt. Awanti bai college
Ramatola

Dr. A.K.Dhurwe
principal
Govt. Kunjbihari choubey
Lal Bahadur nagar

Dr. Sushma choure
principal
Govt. Suaryamukhi Davi
college Chhuria

Dr.K.L.Tandekar
principal
Govt. Nehru P.G. College
DONGARGARH
Distt. Rajnandgaon (C.G.)

Criterion – 1

Curricular Aspects

Details about Academic Programmes

Level of the programme	Number of existing programmes	Number of Programmes added during the Year	Number of self financing programmes	Number of Value added / career oriented programmes
PG	14	05	-	-
UG	10	-	-	-
Total	24	05	-	01
				01

Pattern of Programmes:

Pattern	Number of Programmes
Semester	10 All P.G. Course
Trisemester	-----
Annual	14 All U.G. Course

Criteria – II

Teaching, Learning and Evaluation

Total Number of Permanent Faculty

Total	Assistant Professor	Associate Professor	Professor/Principal	Other
5	5	0	1	0

Number of Permanent Faculty with Ph.D – 6

Number of faculty position recruited (R) and vacant (V) during the year

Assistant Professor		Associate Professor		Professor		Other		Total	
R	V	R	V	R	V	R	V	R	V
5	14	-	-	0	10	0	0	5	24

Number of:

Guest Faculty:

Visiting Faculty:

Temporary:

Faculty Participating in Conferences/Workshop/Seminar/Webinar

No. of Faculty	International level	National level	State level
Attended	11	187	52
Presented Papers	4	55	25
Resource Person	0	0	0

Innovative Processes adopted by the Institution in Teaching and Learning:

ICT Used - Yes

Online - Yes

Experiential Learning - Yes

Video Lecture - Yes

Average Percentage of attendance of students:

86%

**Course/Programme wise distribution of pass percentage: Post
and Under Graduation:**

**ACADEMIC SESSION 2020-21
ANNUAL RESULTS AND ANALYSIS OF UG PROGRAMMES**

Year	UG Programme Name	Number of students appeared in examination	Number of students passed in examination	Pass Percentage
2020-21	B.A. Part I	254	252	99
2020-21	B.A. Part II	271	270	100
2020-21	B.A. Part III	264	262	99
2020-21	B.Sc. Part I	172	171	99
2020-21	B.Sc. Part II	185	179	97
2020-21	B.Sc. Part III	94	94	100
2020-21	B.Com. Part I	137	136	99
2020-21	B.Com. Part II	144	140	97
2020-21	B.Com. Part III	76	76	100
Average Pass Percentage of All UG Programmes				98%

ACADEMIC SESSION 2020-21

ANNUAL RESULTS AND ANALYSIS OF PG PROGRAMMES

Year	PG Programme Name	Number of students appeared in examination	Number of students passed in examination	Pass Percentage
2020-21	M.A.HINDI - I Sem	17	17	100
2020-21	M.A.HINDI -III Sem	21	21	100
2020-21	M.A.HINDI - II Sem	17	17	100
2020-21	M.A.HINDI -IV Sem	21	21	100
2020-21	M.A.POLITICAL SCIENCE-I Sem	26	26	100
2020-21	M.A.POLITICAL SCIENCE -III Sem	15	15	100
2020-21	M.A.POLITICAL SCIENCE-II Sem	26	26	100
2020-21	M.A.POLITICAL SCIENCE -IV Sem	15	15	100
2020-21	M.A.ECONOMICS -I Sem	21	21	100
2020-21	M.A.ECONOMICS -III Sem	23	23	100
2020-21	M.A.ECONOMICS -II Sem	21	21	100
2020-21	M.A.ECONOMICS - IV Sem	23	23	100
2020-21	M.A.HISTORY I Sem	12	12	100
2020-21	M.A.HISTORY -III Sem	06	06	100
2020-21	M.A.HISTORY II Sem	12	12	100
2020-21	M.A.HISTORY -IV Sem	06	06	100
2020-21	M.A.GEOGRAPHY I Sem	12	12	100
2020-21	M.A.GEOGRAPHY-III Sem	11	11	100
2020-21	M.A.GEOGRAPHY -II Sem	12	12	100
2020-21	M.A.GEOGRAPHY-IV Sem	11	11	100

2020-21	ENGLISH – I Sem	24	24	100
2020-21	ENGLISH – II Sem	13	13	100
2020-21	ENGLISH – III Sem	24	24	100
2020-21	ENGLISH – IV Sem	13	13	100
2020-21	MATHEMATICS – I Sem	21	21	100
2020-21	MATHEMATICS – II Sem	01	01	100
2020-21	MATHEMATICS – III Sem	21	21	100
2020-21	MATHEMATICS – IV Sem	01	01	100
2020-21	PHYSICS – I Sem	19	19	100
2020-21	PHYSICS – II Sem	09	09	100
2020-21	PHYSICS – III Sem	19	19	100
2020-21	PHYSICS – IV Sem	09	09	100
2020-21	ZOOLOGY – I Sem	19	19	100
2020-21	ZOOLOGY – II Sem	19	19	100
2020-21	ZOOLOGY – III Sem	19	19	100
2020-21	ZOOLOGY – IV Sem	19	19	100
2020-21	M.COM – I Sem	25	25	100
2020-21	M.COM – II Sem	18	18	100
2020-21	M.COM – III Sem	25	25	100
2020-21	M.COM – IV Sem	18	18	100
2020-21	PGDCA – I Sem	22	22	100
2020-21	PGDCA – II Sem	22	22	100
Average Pass Percentage of All UG Programmes				100

Initiatives undertaken towards faculty development:

Faculty/Staff Development Programmes	Number of Faculty Benefitted
Faculty Development Programme-Being the Best	10
Online Platform Training for online classes	03
Annual sports Meet for Faculty	10

Detail of Administrative and Technical Staff:

Category	Number of Permanent Employees	Number of Vacant Positions	Number of Permanent Positions filled during the year	Number of Positions filled temporarily
Administrative staff	13	8	13	0
Technical Staff	5	0	5	0

Criterion III

Research, Consultancy and Extension

Initiative of the IQAC in sensitizing / promoting Research climate in the institution

Ph.D. Awarded and Guide –

01. **Dr. K.L. Tandekar** (Principal) – Ph.D. awarded 10 January 1997, Research Supervisor since 2009. Five research scholars pursuing Ph.D. under his guidance in Hemchand Yadav Vishwavidyalaya, Durg . 42 research papers published in national and international Journals, one book published with ISBN
02. **Dr. E.V. Revaty** –(Assistant Professor) Ph.D. awarded in 2011. Twelve Research papers published and Three research scholars pursuing Ph.D. under her guidance
03. **Dr. P.K. Jambulkar** –(Assistant Professor) Ph.D. awarded in 1995
04. **Dr. Asha Chaudhary** –(Assistant Professor) Ph.D. awarded in 2008. Five research papers published in national journals. Research supervisor since June 2021
05. **Dr. R.R. Koche** –(Assistant Professor) Ph.D. awarded in 2019, seven research papers published in national journal. Research supervisor since May 2021

Details regarding major project:- NIL

Details regarding minor projects:

	Completed	Ongoing	Sanctioned	Submitted
Number	Nil	02	02	Nil

Criterion – IV

Infrastructure and Learning Resources

Details of the increase in infrastructure facilities:

Facilities	Existing	Newly Created	Source of Fund	Total
Campus area	05	5	Govt.	10 acre
Classrooms	17	15	-	32
Laboratories	-	07	-	07
Seminar Halls	-	01	-	01
No. of important equipment purchased (1-0 Lakh) during the Current year.	150	98	-	248
Value of the equipment purchased during the year (Rs.In Lakhs)	-	-	-	-
Others	-	-	-	-

Computerization of administration and library:

Library services:

Particulars	Existing		Newly added		Total
	No.	Value	No.	Value	Value
Text Books	34805	46,28,226	1263	4,41,191	50,69,417
Reference Book	1909	9,54,641	32	9,961	9,64,602
E- Books & E- Journals	N-List	-	1,99,500+6000+ (N-List through)	5,900	5,900
Journals	21	2,972	06	6,150	9,122
Digital Database	0	0	0	0.	0
CD & Video	0	0	0	0	0
Others (specify)	0	0	0	0	0

Technology upgradation (overall)

Total Computer	Computer Lab	English Lab	Internet	Browsing Centres	Computer Centres	office	Departments	Other
60	30	12	Yes	College	College	03	04	11

Computer, internet access, training to teachers and students and any other Programme for technology up gradation (networking, E- Governance etc.)

1. Conducted FDP, Workshop, Seminar on "Training of ICT in our College."
2. Encourage students to attend workshop and seminar on new technology and trends in this pandemic year.

Amount spent on maintenance in lakhs:

ICI & Equipment :

Campus Infrastructure and Facilities Equipments :

Others : Solar Energy

Total :

Criterion 5

Students Supports and Progression

Contribution of IQAC in Enhancing awareness about Students Supports Services:

1. Students Feed back
2. Organize of Alumni Association
3. Organize of Placement cell
4. Carrier Counseling
5. Coaching for competition examinations
6. Carrier Oriented Course

Total number of students:

UG	PG	Ph.D	Others
2051	383	08	-

Number of students outside the state:

Men	Women
Nil	Nil

Number of International students:

Number	%
Nil	Nil

Under Graduation Last Year(2020-2021)						This Year (2021-2022) Admission in Process					
General	SC	ST	OBC	Physically Challenged	Total	General	SC	ST	OBC	Physically Challenged	Total
178	219	331	940	Nil	1668	172	269	425	1142	Nil	2007

post Graduation Last Year
(2020-2021)

This Year (2021-2022) Admission
in Process

General	SC	ST	OBC	Physically Challenged	Total	General	SC	ST	OBC	Physically Challenged	Total
48	53	76	206	Nil	383	38	45	81	207	Nil	271

Details of Students Support mechanism for Competitive Examinations
(if any) :-

Guest lecture, Quiz competition, Special Class etc. organized by
Institution.

Details of Students Counseling and Career Guidance:-

Conducted Carrier Counseling and Carrier Guidance in our College

Details of Campus Placement:-

On Campus			Off Campus
Number of organizations Visited	Number of Students Participated	Number of Students Placed	Number of Students Placed
1	50	10	20

Details of gender sensitization Programs :

1. Common Room
2. Counseling
3. Safety & Security
4. Women Cell
5. Grievance and re-addressel cell

Scholarships and Financial Support:

2020-2021

Financial Support from Institution	No. of Students	Amount
Financial Support from Government	1270	3334158
Financial Support from other Source	14	13676
Number of students who received International/ National recognitions	NIL	NIL

Criterion- VI

Governance, Leadership and Management **State the Vision and Mission of the institution**

Vision of the College – The vision of the college is to strive for the socio-intellectual upliftment of the students. Most of them belong to educationally challenged background.

Mission of the College – We want to prove ourselves as a credible institution of higher education which serves the surrounding society through imparting quality education, moral values and discipline.

Does the Institution have a Management Information System?

Yes

Quality improvement strategies adopted by the institution for each of the following: Curriculum Development

Teaching and learning

To enhance the quality of teaching –learning activities ICT tools are used

Examination and Evaluation

Transparency in all the internal & External examination and collect the student feedback regarding the achievements of POs and COs

Research and Development

Encourage to teacher for research work through counselling-maximum number of teachers are PhD awarded

Library, ICT and Physical Infrastructure/ Instrumentation

Smart class rooms in maximum department, lab, conference hall, offices, staff rooms facilities with Wi-Fi & Internet connection in the campus

Human Resource Management

A part from teaching the curriculum all other skills of teachers for example singing, dancing, counselling are fully utilized for the students.

Faculty and Staff recruitment

1. Faculties are recruited by the state government through Public Service Commission
2. Guest Faculties are appointed by the department of Higher Education , Chhattisgarh government on base of merit

Industries interaction collaboration

Collaboration with different Govt. and non-govt. institutions

Admission of students

As directed by the Government and university norms

Whether annual financial audit has been - Yes

Whether Academic and Administrative Audit (AAA) have been done?

Audit	External		Internal	
Academic	Yes	Principals of different colleges	Yes	College staff committee
Administrative	Yes	Mr. Jined Jain Chartered Accountant	No	-

Activities and Support from the Alumni Association

1. Alumni Association conducts alumni meet every year
2. Provide a stage to alumni for career guidance and counselling, vocational training and experience to their juniors

Activities and Support from Parent-Teacher Association

Organize parents meeting after model and pre semester examination so that the parents should know about their children's academic growth and solve their problems and give suggestion if any.

Development programmes for supportive staff

Organize FDP for Non-Teaching staff from time to time

Initiatives taken by the institution to make the campus eco-friendly

1. Tree plantation every year in the campus and outside of the campus.
2. Plastic and Tobacco free campus
3. Tanks for water harvesting
4. Oxygen Zone (Botanical Garden)

Innovations and Best Practice

Innovations Introduced during this academic year which have created a positive impact on the function of the institution

1. MOUs with more than 24 govt. institutions and organized different types of collaborative activities for students overall development.
 2. Digital teaching given under new education policies in this pandemic onwards.
 3. Environmental consciousness developed to various Environmental issues under the last five year.
 4. Various activities under red cross society by the students for the society.
-

Give two Best Practices of the Institution:

1. To provide financial assistance and free study materials to economically deprived students of the college.
2. Skill development workshop for self dependency and personality development.

Institutional Weakness

- Vacant teaching and non-teaching posts
- Inadequate research facilities
- Most of the courses are traditional which are unable to meet job market needs.
- We suffer from the insufficiency of English medium books and research materials.
- Most of the students are from rural background which troubles them in travel and connectivity
- The majority of students is from remote area therefore they are poor in English language
- Mostly students are from economically weak section of the society
- CBCS has not yet been implemented.

Institutional Opportunity

- Being the largest college of the tehsil, this institution has the opportunity to prove itself as a source of high quality education, training and personality development of its students who largely come from the weaker sections of society.
- Being fortunate in having well-qualified teachers with research orientation, we have the potential to become a model to emulate for the nearby smaller colleges in terms of our commitment to the enhancement of research activities and better teaching practices. Considering our status as a Postgraduate college with PG level teaching in ten subjects, we have the opportunity to enhance the involvement of our students in research activities.
- To introduce job oriented and skill development, self-employed course and other emerging subjects.
- To motivate for self-employment opportunities
- To start research center in two subjects

To develop collaborative work with MOU signed government and non-government institutions, industries and NGOs

Institutional Challenge

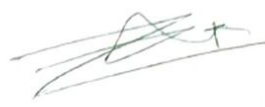


- To remove the problems of vacant teaching and non-teaching posts.
- The largest portion of the student intake of this college comes from the surrounding villages with low quality learning outcome at the school level. Our challenge is to provide our students credible education in terms of quality and to make them able to pace with the world.
- This college is committed to its goal of constantly proving itself as an institution of higher education which imparts quality education, teaches moral values and discipline and, thus, participates in the vital process of nation building.
- To generate resources for up-gradation of infrastructure
- To provide girls' hostel
- The institutional challenge in the lack of funds
- A rise in global standards has raised expectations of students and other stakeholders for the demand of new courses
- More job oriented courses, research projects, increasing employability and skill levels of students are challenges which the institution is attempting to overcome.

Strength, Weakness, Opportunity and Challenges(SWOC)

Institutional Strength

- The college has three faculties-- Arts, Science and Commerce- teaching Undergraduate and Post graduate course.
- All the teachers are well qualified.
- Out of 31 teachers 12 are Ph.D. degree holders in their respective subjects. They are research- minded and oriented with the belief that regular research is the base from which qualitative teaching and learning can take place.
- Some of the faculty members have to their credit high quality publications with ISBN and ISSN.
- Among the faculties, there are 05 Research Supervisors for Ph.D., one of them is also Ph.D. thesis examiners. This College is presently Research Centre for Ph.D. in Commerce.
- There are 56 Students Supportive Committees.
- Help desk and complain boxes facilities .
- Boys' hostel facility .
- The college campus is under the watch of CCTV Cameras
- LCD for displaying the information at entrance hall
- Teaching aids for ICT enabled teaching
- Well equipped Science laboratories
- Adoption of number of best practices
- NSS,NCC and Red Cross units to serve the society
- Wide range of extension, co-curricular and extra-curricular activities.
- Language lab in the department of English with 12 systems and Language lab software Sanako Study.
- Computer lab
- Business and Motivation Lab in Commerce
- Semi-automated Central library with plenty of reference and text books, periodic journals and newspaper and separate reading room for the students and faculty members.
- We subscribed to the National Library and Information Services Infrastructure for Scholarly Content (NLIST) of INFLIBNET
- LED bulbs and solar street lights are installed in the campus
- Concern and facilities for differently abled
- Gender – friendly premises
- Eco-friendly premises, there is an oxygen Zone
- Free Wi-Fi internet facility in the college campus for all students and staff
- The college has a stadium of its own with sufficient facilities for outdoor games and there are sufficient facilities for indoor games and a Yoga Meditation center also available in the college.
- There are shops built in the stadium campus and the stadium is maintained by its rent.
- Gym facility

Audit team members' details:

S.no.	Name	Designation	Signature
01	Dr. T.S. Thakur	Principal, Govt. Avanti Bai College, Ramatola	
03	Dr. A.K. Dhurve	Principal, Govt. Kunjbihari Choubey Lal Bahadur nagar	
03	Dr. Sushma Chaure	Principal, Govt. Rani Suryamukhi Devi College, Chhuria	



Dr. K.L. Tandekar

Principal,
Govt. Nehru PG College, Dongargarh
Dist. - Raipur (C.G.)