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01 100 1934875

Re-certification Audit Report as per

ISO 9001:2015

For

Agricultural Credit Policy Council

**Unit 2808 One San Miguel Avenue Bldg.,
San Miguel Ave cor. Shaw Blvd., San
Antonio Pasig City**

Client	Standard(s)	Certification Number(s)	Audit Type
Agricultural Credit Policy Council	ISO 9001:2015	01 100 1934875	Re-certification Audit (25% Remote Audit & 75% On-site Audit)

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Audit Leader	:	Maribeth Lucañas
Audit Team	:	Michelle Pestañas, Minda Villapando, Anelyn Matriano
Client's representative	:	Ms. Jocelyn Alma R. Badiola, Executive Director Ms. Emmalyn J. Guinto, Chief, Communications and Public Affairs Division
Audit Date	:	28 September 2022

1 Audit result

Management system effectiveness was verified on site by means of random sampling by an appropriately selected audit team. This applies in particular to the compliance of workflows with standard requirements and the descriptions in management system documentation. The audit objectives as mentioned in the audit plan, the special features of the organization's business activities, the applicable statutory and regulatory requirements and the requirements set forth in other generally applicable documents were also taken into account. This was done by means of a sampling approach, by conducting interviews and reviewing the appropriate documentation. Audit findings and recommendations regarding opportunities for improvement have been set forth in Sections 4 of this report.

<input type="checkbox"/>	The last audit revealed nonconformities which have been demonstrably corrected. The corrections and corrective actions taken in this respect have been verified.								
<input type="checkbox"/>	A stage 1 audit was performed and the organization found ready for certification. Identified weaknesses, if any, have been eliminated and the respective corrective action verified.								
<input checked="" type="checkbox"/>	<div>The current audit revealed the following nonconformities:</div> <table><tr><td>Standard(s):</td><td>No. of major nonconformity</td><td>No. of minor nonconformity</td></tr><tr><td>ISO 9001</td><td>0</td><td>0</td></tr></table>			Standard(s):	No. of major nonconformity	No. of minor nonconformity	ISO 9001	0	0
Standard(s):	No. of major nonconformity	No. of minor nonconformity							
ISO 9001	0	0							
<input type="checkbox"/>	The major nonconformities (No. x) with individual standard elements require a re-audit to verify the effectiveness of the corrections and corrective actions (probable date:. dd.mm.yyyy)								
<input checked="" type="checkbox"/>	The organization has established and maintains an effective system to ensure compliance with its policy and objectives. The audit team confirms in line with the audit targets that the organization's management system complies with, adequately maintains and implements the requirements of the standard(s).								

The auditor/audit team therefore recommends (provided nonconformity response has been approved):

<input checked="" type="checkbox"/>	Award of the new certificates.
<input type="checkbox"/>	Maintenance of the existing certification.
<input checked="" type="checkbox"/>	Inclusion of the changes (see Section 3) in the scope of application of existing certifications
<input type="checkbox"/>	Maintenance or issue of the certificates only after successful completion of a re-audit.

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2 Scope

2.1 Description of the organization

The Agricultural Credit Policy Council (ACPC) was created in 1986 by virtue of E.O. No. 113, s.1986, to synchronize all agri-credit policies and programs in support of the Department of Agriculture (DA) priority programs. It was tasked to monitor and evaluate the economic soundness of all credit programs. It became an attached agency of the DA through E.O. No. 116, s.1987.

It was mandated to administer the Comprehensive Agricultural Loan Fund (CALF) through A.O. No. 5, s.1987. The ACPC's role was expanded in 1992 under the Magna Carta of Small Farmer as per R.A. No. 1992, to conduct special projects to promote innovative financial schemes for small farmers and to orchestrate institution building programs for agricultural finance institutions.

The Agricultural Modernization Act (AFMA) or RA 8435 paved the way for the ACPC to carve its niche in a liberalized and globalized environment. In support of the AFMA, ACPC was tasked to develop the design of the Agro-Industry Modernization Credit and Financing Program on the AMCFP which is the only credit pipeline for agriculture and fisheries under the law. Subsequently, the ACPC was tasked to oversee the implementation of the AMCFP as per AMCFP Guidelines (ACPC Council Resolution No. 01-1999).

In 2016, the DBM approved the creation of a new Accreditation and Certification Division in the ACPC with three (3) plantilla positions in support of ACPC's added mandate to certify the eligibility of bonds and other debt securities and accredit non-bank rural financial institutions (NBRFIs) pursuant to Republic Act No. 10000 or the Agri-Agra Reform Credit Act of 2009 and its I.R.R. and DA - Special Order 605 of 2011.

ACPC's functions were further expanded in scope and coverage in relation to the implementation of nationwide access to a fast, convenient and affordable credit for small farmers and fisherfolk which is ACPC's sole responsibility to ensure that credit funds being infused by the National Government are directly utilized by the intended small farmers and fisherfolk-beneficiaries in support of the DA food security program.

Vision:

The ACPC is the institution on agri-credit and program development that promotes a sustainable and effective delivery of financial services to the countryside.

Mission:

To develop and advocate agri-credit policies and orchestrate programs that promote farmers and fisherfolk access to sustained financial services.

2.2 Scope of certification

Scope of certification: (per standard):	Provision of Agricultural/ Rural Finance Policy Research and Formulation; Planning; Development of Innovative Financing Schemes; Institutional Capacity Building; Monitoring; Fund Management; Communications and Public Affairs; Information Systems Management; and Finance and Administrative Services.
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ISO 9001 standard requirements which are not applicable:	None
Reasons for non-applicability:	N/A

The organization operates on a single-shift with a flexible 8-hour scheme between 7:00AM and 6:00PM, Monday to Friday.

The audit was done 25% remotely by using ICT (Information and Communication Technology) and 75% physically on-site audit. The used method was effective to achieve the audit objectives.

The following sites and their scopes are included in the scope of certification:

Site No.	Sites included in cert. Name/address of site	No. of emp.	Standard and Scope	Audited
01	Agricultural Credit Policy Council (ACPC) Unit 2808 One San Miguel Avenue Bldg., San Miguel Ave cor. Shaw Blvd., San Antonio Pasig City	127	Provision of Agricultural/ Rural Finance Policy Research and Formulation; Planning; Development of Innovative Financing Schemes; Institutional Capacity Building; Monitoring; Fund Management; Communications and Public Affairs; Information Systems Management; and Finance and Administrative Services.	✓

3 Changes in the management system / Contract review

The following changes have been implemented in the management system and the management system documentation since the last audit. Major changes are:

- A. Amendment in scope from “Provision of Agricultural/ Rural Finance Policy Research and Formulation; Planning; Development of Innovative Financing Schemes; Institutional Capacity Building; Accreditation and Certification; Monitoring; Fund Management; Communications and Public Affairs; Information Systems Management; and Finance and Administrative Services” to Provision of Agricultural/ Rural Finance Policy Research and Formulation; Planning; Development of Innovative Financing Schemes; Institutional Capacity Building; Monitoring; Fund Management; Communications and Public Affairs; Information Systems Management; and Finance and Administrative Services.
- B. Quality Policy amendment of the following
 - a. # 5 – reflect function of program monitoring division
 - b. #7 – new function of Policy Research Division (previously known Accreditation and certification Division)
- C. New Credit Policies
 - a. New Agri-Agri law new Agriculture, Fisheries and Rural Development Financing Enhancement Act of 2022law mandates that all banking institutions, except newly established banks, must set aside at least 25% of their total loanable funds for agricultural and fisheries-related sectors after they have been operating for five years.

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The implementation of these changes in the existing management system and the management system documentation was verified within the framework of the audit.

The description of the scope in the certificate appropriately reflects the scope of the management system.

A corresponding printing request is attached.

The audit plan was not changed during the audit.

4 Audit findings

The audit findings related to the audited standards are listed in the annexes to this report (see. Annex ISO 9001:2015).

All information gained during the audit will be treated with strict confidentiality by the auditor(s) and the certification body. In view of the sampling approach applied to the audit, weaknesses and nonconformities may still exist which have not been identified during the audit.

No.	Unit/Department Site	Positive findings
1	Customer Satisfaction	An increase of 16% on the overall average customer satisfaction rating from Y2020 to Y2021 is noteworthy.
2	Policy, Planning, Program Development and Advocacy •Policy Research & Planning	During the pandemic there was a new credit program created "Expanded Survival and Recovery (SURE) Aid Loan Assistance or "SURE Covid-19."
3	Assets Disposition Division	Over achievement of target on Collection on sale of properties for 1 st Semester by Actual: P.795M vs. target P0.581.0 (or 136%)
4	Fund Recovery	Achievement of target and beyond Y2021 and 2022 Q1 and Q2 is laudable. The record shows for Y2021, ACPC achieved 438.248M against a target of 110.465M. In addition, for Q1 and Q2 2022, the achievement of 224,201,997.84 and 294M respectively against 92,642,439.33 Q1 2022 and 155,480,855.48 Q2 2022.
5	IT	The provision of the following initiatives for continual improvement is noteworthy: <ul style="list-style-type: none"> • Tech Connect – online ticketing system implemented Q1 2021 (online helpdesk/ internal used for ACPC) • ACPC Online Helpdesk system, soft-launched dated Sep 12, 2022, and plan to go live on Oct 1, 2022 Procurement of 49 units of Laptops (current status: Notice to Proceed dated Sep 1, 2022) is commendable.
6	Commendation	Appreciation from Civil Service Commission (contact center of Bayan), no public feedback is commendable.

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7	Awards & Recognition	<p>The following awards & recognition are commendable:</p> <p>Certificate of Compliance is presented to ACPC for being fully-compliant with the set of Freedom of Information (FOI) requirements, as validated by the Presidential Communication Operations Office, pursuant to Section 5 (b) of Memorandum Circular No. 2021 -, issued by the Inter-Agency Task Force on the Harmonization of National Government Performance Monitoring, Information, and Reporting System (Task Force Administration Order 25, s. 2011). – given May 17, 2022</p> <p>ACPC gets an unqualified opinion from the Commission on Audit (COA) for its 2020 financial reports – from Commission on Audit – April 26, 2021.</p> <p>The DA-ACPC received its second consecutive highest audit rating termed as “unqualified audit opinion” from the Commission on Audit (COA) – from Commission on Audit – April 11, 2022.</p>
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The following recommendations and opportunities for improvement provided by the auditor(s) are intended to contribute to the continuous improvement of the management system.

No.	Unit/Department Site	Recommendations and opportunities for improvement
1	Scope of QMS	Ensure to explicitly define applicability or none exclusion of the standard requirements in the scope of QMS.
2	Management Review	For effective review and decision making, consider to summarize data results of input information from other relevant meetings (Quality Objectives, external Providers performance)
3	Internal Audit Process	<p>May consider to update training related to auditing and requirements of the standard (ISO 9001:2015, ISO 19011:2018).</p> <p>There is a need to improve audit checklist based on appropriate clauses per process area and evidence document to support the conduct of audit.</p>
4	HRM	<p>Division performance is evident. Evaluation of Training effectiveness will be check next audit.</p> <p>May review recruitment service delivery for non-plantilla position i.e Turn-around-time.</p>

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5	Document Control	<p>There is on-going review of the retention period for manual and digital documented information. Status will be check next audit.</p> <p>May identify performance indicator to gauge compliance rate of the organization documented information and records i.e random audit</p>
6	Support Processes – Administrative Management – General Services	<p>Consider to revisit the Administrative Division Manual of Operation, particularly the Introduction “Administrative, Financial and Management Staff”.</p> <p>May consider to establish list of vehicles with current status, e.g., in good running condition, for repair, for disposal, sold, etc.). Also, consider to update and enhance the preventive maintenance plan/schedule.</p> <p>May consider to establish list of equipment with location, e.g., Air-condition – conference room.</p>
7	Support Processes – Communication & Public Affairs	<p>May consider to establish monitoring on production of IEC (Information, Education, Communication) Materials with Time Table, (e.g., Writing news article, Writing success stories and Production of brochures).</p>
8	Procurement	<p>Ensure timely update of Suppliers List.</p> <p>Ensure providing measurable success indicators/targets detailed in the IPCR</p> <p>May consider providing a consolidated summary list of performance evaluations of the external provider.</p> <p>Need to review the procedure Procurement, Supply and Property Management ACPC-HRMS-00 relevant to the manner and frequency of conducting an evaluation of external provider performance.</p> <p>May consider providing summary report for the performance evaluation of suppliers for ease of monitoring.</p>
9	Fund Recovery	<p>Measurable target for defined OTP increased funds based on recovery funds must be ensured.</p> <p>Relevant determine mitigating actions to address risk, may consider stipulating additional controls including a timeline of implementation if it still with the same risk category/rating after assessment/evaluation conducted.</p> <p>May need to include in the Risk Register, risk related to unliquidated terminated completed programs.</p>

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10	IT	<p>Relevant to the monitoring of determining objectives, targets, and programs may need to improve the manner of presenting the achievement against the planned target. (i.e. 100% of requests for technical support are provided within 72 hours)</p> <p>Customer satisfaction after each transaction for IT Services will be implemented in the new platform ACPC Online Helpdesk. Results will be checked next audit.</p> <p>Ensure to explicitly document changes as part of qms documentation. (I.e. Enhancement /administration of property inventory management system (PIMS).</p> <p>Ensure availability of Preventive Maintenance Schedule in support of the monthly accomplishment report.</p>
11	Handling Customer Complaint	<p>May consider to maximize the use of social media platforms (I.e. FB page and msgr) in getting the customer satisfaction after every transaction inquiry. Likewise, may consider providing data analytics for every posted information.</p> <p>Relevant to complaints received thru 8888, achievement of 72 hours replied response timeline must be observed.</p> <p>May consider to formally register as QMS document procedure/guidelines related to handling customer complaints.</p>
12	Program Development Division (PDD)	<p>Under the new administration there is a program identified which is focused on helping the increasing out of school youth. The progress of the development of this program will be verified next audit.</p>

5 Dates

Due Date for the next audit

2023-10-02

Agreed date for the next audit

2023-09

28 September 2022

Date



Maribeth Lucañas, Minda Villapando, Anelyn Matriano, Michelle Pestañas

Audit Leader / Auditor(s)

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Annex ISO 9001:2015

Item	Audit result
Context of the organization	<p>The organization has determined internal and external issues related to the following subject areas (Note: subject areas can be legal requirements, co-operations, competition, community etc.)</p> <ul style="list-style-type: none"> • Political • Economy • Social • Technological • Legal • Environment <p>The organization has identified interested parties and the requirements of these parties. Examples for such parties are:</p> <ul style="list-style-type: none"> • Positive – Department of Agriculture (DA), Farmers, Cooperatives, Rural • Banks, Landbank of the Philippines (LBP), Development Bank of the Philippines (DBP), ACPC Council Members, Department of Budget & Management (DBM) • Neutral – Bureau of Internal Revenue (BIR), Government Service Insurance System (GSIS), Philippine Health Insurance Corporation (PHIC/PhilHealth), Home Development Mutual Fund (HDMF/Pag-IBIG Fund), Commission on Audit (COA), Civil Service Commission (CSC)
Policy / objectives	<p>Top Management has declared its quality policy binding and implemented. The quality policy is appropriate and provides a framework for the respective quality objectives. It commits all employees to pursue continuous quality system improvement. The quality objectives are measurable and are controlled, communicated and updated regularly.</p> <p>Key quality objectives include:</p> <p>To increase access of small farmers and fisherfolks to formal credit under the ACPC Agro-industry Modernization Credit and Financing Program. The following performance indicators are used:</p> <p>Outcome Indicators</p> <ul style="list-style-type: none"> • 85% to 95% Repayment rate (loans collected/ loans matures) • 2.515B loans granted to credit retailers/ lenders and to end-borrowers. • 3.62 B loan granted to end borrower • 2.685 SFF Borrower • 223 MSE Borrower • 15 credit program orientation and credit matching seminars and workshops conducted • 70 farmers and fisherfolk organizations provided with institutional capacity building assistance

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Item	Audit result
Process control including outsourced processes	<p>The processes available in the organization have been identified and documented. Process workflows and interactions have been described and appropriately controlled. The processes are evaluated at regular intervals by means of key performance indicators.</p> <p>Key processes within the scope of product realization include:</p> <ul style="list-style-type: none"> • Policy, Planning, Program Development And Advocacy <ul style="list-style-type: none"> - Planning - Program Development - Advocacy / Institutional Capacity Building - Policy Research and Advocacy • Program monitoring and information system management <ul style="list-style-type: none"> - Monitoring - Information Management Systems • Fund management <ul style="list-style-type: none"> - Fund recovery - Asset disposition • Administrative, financial and management Staff <ul style="list-style-type: none"> - Administrative - Financial and management <p>The following processes have been outsourced and are appropriately reviewed and controlled:</p> <ul style="list-style-type: none"> • Research Studies • Program evaluation • IT Systems Development • 3rd Party Appraisal for Assets
Risk-based thinking	<p>The requirements for risk-based thinking are being realized in the organization as follows:</p> <p>Risk-based thinking has been applied for the following processes:</p> <ul style="list-style-type: none"> • Monitoring division • Information System Management Division • Institutional Capacity Building Division • Policy Research and Advocacy Division <p>Examples of risks and opportunities of processes identified are:</p> <ul style="list-style-type: none"> • Delay preparation and submission of updates/reports to data users • No standard indicators and regularity in the preparation and submission of monitoring reports • Sudden change /resignation in team members • Partner institution submit status report with unaccomplished data fields in reporting template. • Insufficient ICT equipment • Lack of training for COS Staff • High Turnover of programmers

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	<ul style="list-style-type: none"> • ACE portal not updated • Poor internet and communication lines that hinders online training • Insufficient manpower Access to ACPC-ICB training of borrowers directly assisted by PLCs is limited due to limited manpower and budget. • Short notice requests may not be addressed due to prior schedules and limited ICB staff. • Restricted conduct of field survey <p>Examples of measures taken to react on identified risks are:</p> <ul style="list-style-type: none"> • Monthly coordination with SPMO, PMO and field personnel per region • Conduct monthly meeting with program data management team. • Monitoring of hiring • Quarterly monitoring of cloud storage • Submission of requisition • Multitasking by existing programmers • Close monitoring of PLC's compliance • Re-schedule training to later date. • AD staff handles multiple tasks. • Conduct of initial training to direct PLC borrowers (i.e. FLT for SURE loan facility borrowers); • Conduct the activity via on-line. • Maximize use of digital and online platforms <p>Examples of risks and opportunities concerning the context of the organization are:</p> <ul style="list-style-type: none"> • Changing in programs and/or program guidelines due to change in administration • Additional cost on hiring due to implementation of Joint Circular NO.2 s. 2020 of COA-DBM • Use of Document Tracking System <p>Strengthening of ACPC role and function through participation in relevant legislative bills being proposed</p> <p>Concerning risk based thinking the following tools are used:</p> <ul style="list-style-type: none"> • Risk and Opportunities Registry
Customer-related and other requirements	<p>The organization analyses and evaluates customer requirements and/or enquiries and any documented, assumed, statutory and regulatory requirements within the scope of a production and feasibility study performed in a team.</p> <p>The person who prepared the offer reviews the contract to ensure its compliance with the offer and documents this compliance in an order confirmation. The same procedure applies to amendments.</p> <p>The following process requirements significantly affect product or service quality:</p> <p>Policy and Planning</p> <ul style="list-style-type: none"> o Policy and Planning – accurate prediction of current economic trends

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	<p>to allow for a well-planned and budgeted next calendar year. Similarly, well planned and designed Policy Research Studies, such as the Small Farmer & Fisherfolk Indebtedness Survey, done every 2 years by ACPC, track the borrowing behavior of farmers and fisherfolk, from formal or informal</p> <p>o Accreditation & Certification – through review and verification of all required documentation to issue accreditation for Non-Bank Rural Financial Institutions (NBRFI) and certifications of Funds and Debt Securities as per R.A. No. 10000 (Agri-Agra Law)</p> <p>Program Development and Advocacy</p> <p>o Program Development – through review and verification of all required documentation for approval to the PUNLA (Program for Unified Lending to Agriculture) – PLEA (Production Loan Easy Access) Program.</p> <p>o Advocacy – provide competence internal and outsourced trainors and service providers in providing Institutional Capacity Building (ICB) support for ACPC Credit Programs as per R.A. No. 7607 Magna Carta for Small Farmers)</p> <p>Program Monitoring</p> <p>o Monitoring – scheduling of Field Evaluation for ACPC programs such as the PUNLA-PLEA, and monitoring of bank lending to farmers in conjunction with the Bangko Sentral ng Pilipinas.</p> <p>Fund Management</p> <p>o Fund Recovery – ensuring the effective collection of ageing (or past due) Accounts Receivables.</p> <p>o Assets Disposition – the monitoring of assignment of foreclosed properties and receivables (with attached collaterals) from closed banks through the PDIC.</p> <p>Information System Management</p> <p>Key regulatory, statutory and customer-related requirements include:</p> <ul style="list-style-type: none"> • E.O. No. 113, s.1986 • E.O. No. 116, s.1987 • DA A.O. No. 5, s.1987 • R.A. No. 7607 • R.A. No. 8435 • DA A.O. No. 6, s.1998 • AMCFP, Operating Policies and Procedures, 2001 + Attachment 2 • BSP Cir. No. 217 (1999) • Opinion of Solicitor General (Oct 1999) • S.O. No. 438, s.1999 • E.O. No. 138, s.1999

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	<ul style="list-style-type: none"> • H.R. No. 1130, s.1999 • E.O. No. 338, s.2001 • R.A. No. 10000, s.2009 • IRR of R.A. No. 10000 • DA S.O. No. 605, s.2011 • Issues on the Rationalization Plan of ACPC, s.2013 • ACPC Res. No. 99-01 • DA-DOF-DBM Joint Cir. No. 1, s.2003 • Memorandum, 23 Jan 2013, Rat-Plan of ACPC • Agra-Agri Law,"Agriculture, Fisheries and Rural Development Financing Enhancement Act of 2022
Customer satisfaction and complaints	<p>The organization maintains documented and effective procedures governing the handling of information, data analyses, improvement actions and responses to customer feedback.</p> <p>A Citizen/Client Satisfaction Survey of frontline services is conducted. The indicators used in obtaining feedback are based on service dimensions prescribed by the AntiRed Tape Act. These service dimensions are</p> <ul style="list-style-type: none"> - Responsiveness - Reliability - Access and Facilities - Communication - Costs - Integrity - Assurance - Outcome <p>A 5-point Likert scale is used, i.e 1- very dissatisfied, 5 very satisfied</p> <p>Overall rating of 4.6 equivalent to Very Satisfied.</p> <p>There are a total of 14 complaints received from 8888 from January to October 2021. Need to determine the valid complaints, analyze the cause(s) and take actions and evaluate effectiveness of actions.</p>
Internal audit and management review	<p>The organization measures the implementation, maintenance and effectiveness of the management system by means of annually scheduled system audits. The organization reliably carries out these audits on April 18, May 11, June 30 July 25 August 5, 8, 9, 10, 15,17 and September 9, 15 and 16, 2022 with 28 internal auditors.</p> <p>Audit Results:</p> <ul style="list-style-type: none"> a. Positive Findings – 7 b. Recommended and opportunities for improvement – 52 c. Nonconformity - 0 <p>Top management reviews the organization's management system at regular intervals and in line with the requirements to ensure its continuous suitability, adequacy and</p>

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	effectiveness. The management review was carried out in accordance with the requirements and was effective. Date of last management review: 16-09-2022
Use of certificate and logo	The organization uses the logo and the certificate (e.g. on business cards, company brochures, websites etc.) in compliance with the requirements.

Chapter of standard	4.1	4.2	4.3	4.4	5.1	5.2	5.3	6.1	6.2	6.3		
Rating *	-	-	-	-	-	-	-	-	-	-		
No. of nonconformity	1	1	1	1	1	1	1	1	1	1		
Chapter of standard	7.1	7.2	7.3	7.4	7.5	8.1	8.2	8.3	8.4	8.5	8.6	8.7
Rating)*	-	-	-	-	-	-	-	-	-	-	-	-
No. of nonconformity	1	1	1	1	1	1	1	1	1	1	1	1
Chapter of standard	9.1	9.2	9.3	10.1	10.2	10.3						
Rating)*	-	-	-	-	-	-						
No. of nonconformity	1	1	1	1	1	1						

*** Rating:**

- 1 = conforming
- 2 = not audited in this audit
- 3 = nonconformity (see nonconformity report)
- 4 = not applicable

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Annex ISO 14001:2015

Item	Audit result
Context of the organization	<p>The organization has determined external and internal issues that are relevant to achieve the intended outcome of the environmental management system including relevant environmental conditions.</p> <p>The organization has identified the following interested parties:</p> <ul style="list-style-type: none"> • <p>The following needs and expectations are attributed to these interested parties:</p> <ul style="list-style-type: none"> •
Policy / objectives	<p>The environmental policy established by top management was communicated and implemented in the organization. It is suitable for the activities of the organization and its context. It includes the commitment to the protection of the environment continual improvement to enhance environmental performance and compliance with the binding obligations. It provides the framework for establishing and reviewing environmental objectives. The organization has determined suitable objectives, associated indicators to monitor progress and actions to achieve them.</p> <p>Key environmental objectives and associated indicators are:</p> <ul style="list-style-type: none"> • • •
Environmental aspects, determination of risks and their changes since the last audit	<p>Key environmental aspects are identified and their significance and impact on the environment is reviewed and updated at regular intervals. This includes all activities, products and services that it can control or influence considering a life cycle perspective.</p> <p>Key environmental aspects include (per site, where appropriate):</p> <ul style="list-style-type: none"> • • <p>The following risks and opportunities for the environmental management system have been determined (regarding environmental aspects, binding obligations and other issues):</p> <ul style="list-style-type: none"> • •
Identification and monitoring of compliance obligations	<p>The organization identifies compliance obligations at regular intervals and makes them accessible to all relevant functions. Compliance is evaluated at regular intervals.</p> <p>The following permits and licenses are available at the organization (by site, where appropriate):</p> <ul style="list-style-type: none"> • • •
Leadership, responsibility and authority and communication	<p>The management demonstrates commitment with respect to the environmental management system and integrates its requirements into the organization's business processes. The following persons also have significant responsibility for the environmental management system:</p> <ul style="list-style-type: none"> • •

Client	Standard(s)	Certification Number(s)	Audit Type
Agricultural Credit Policy Council	ISO 9001:2015	01 100 1934875	Re-certification Audit (25% Remote Audit & 75% On-site Audit)

Item	Audit result
	The organization has set up an effective communication process for both internal and external communication.
Operation and performance evaluation	<p>The organization identifies all environmentally relevant operations and activities and has established adequate processes for their planning and control. Consistent with a life cycle perspective this includes upstream and downstream activities as far as possible as well as outsourced processes and changes.</p> <p>The following activities are of particular relevance:</p> <p>Measures at upstream phases of the life cycle (specific purchasing criteria, etc.):</p> <ul style="list-style-type: none"> • • <p>Measures regarding outsourced processes:</p> <ul style="list-style-type: none"> • <p>Environmental criteria regarding the product/service development:</p> <ul style="list-style-type: none"> • <p>Downstream measures regarding the end of the life cycle:</p> <ul style="list-style-type: none"> • <p>Monitoring and measurement of the environmental performance takes place according to adequate criteria and methods. Environmental indicators have been established for the analysis and evaluation of environmental performance.</p>
Internal audit and management review	<p>The organization measures the implementation, maintenance and effectiveness of the management system by means of annually scheduled system audits. The organization reliably carries out these audits.</p> <p>Top management reviews the organization's management system at regular intervals and in line with the requirements to ensure its continuous suitability, adequacy and effectiveness. The management review was carried out in accordance with the requirements and was effective.</p> <p>Date of last management review: dd-mm-yyyy</p>
Use of certificate and logo	The organization uses the logo and the certificate (e.g. on business cards, company brochures, websites etc.) in compliance with the requirements

Chapter of standard	4.1	4.2	4.3	4.4	5.1	5.2	5.3	6.1	6.2	
Rating*										
No. of nonconformity										
Chapter of standard	7.1	7.2	7.3	7.4	7.5	8.1	8.2	9.1	9.2	9.3
Rating*										
No. of nonconformity										
Chapter of standard	10.1	10.2	10.3							
Rating*										
No. of nonconformity										

* **Rating:** 1 = conforming
 2 = not audited in this audit

Audit Report

Client	Standard(s)	Certification Number(s)	Audit Type
Agricultural Credit Policy Council	ISO 9001:2015	01 100 1934875	Re-certification Audit (25% Remote Audit & 75% On-site Audit)

3 = nonconformity (see nonconformity report)

4 = not applicable

Client	Standard(s)	Certification Number(s)	Audit Type
Agricultural Credit Policy Council	ISO 9001:2015	01 100 1934875	Re-certification Audit (25% Remote Audit & 75% On-site Audit)

Annex ISO 45001:2018

Item	Audit result
Context of the organization	<p>The organization has determined external and internal issues that are relevant to achieve the intended outcome of the OH&S management system.</p> <p>Apart from the workers, the following interested parties have been identified:</p> <ul style="list-style-type: none"> • • <p>The following needs and expectations are attributed to these interested parties:</p> <ul style="list-style-type: none"> • •
Policy / objectives	<p>The occupational health and safety (OH&S) policy defined by top management was communicated within the organization and made available to interested parties. The OH&S policy is implemented, documented and appropriate and includes a commitment to continual improvement, to the elimination of hazards and reduction of OH&S risks as well as compliance with all relevant legal and other OH&S requirements. It also includes a commitment to consultation and participation of workers and their representatives. It provides the framework for establishing and reviewing OH&S objectives.</p> <p>OH&S objectives focus on the continual improvement of the occupational health and safety of employees and are measurable or capable of performance evaluation.</p> <p>Key OH&S objectives and targets include:</p> <ul style="list-style-type: none"> • • <p>Based on 1.000.000 hours worked per year is the number of accidents xx,x.</p> <p>In this accident were considered with nonproductive greater one day.</p>
Hazard identification, risks and opportunities and actions to address them.	<p>The organization has established and maintained a process for the ongoing and proactive hazard identification.</p> <p>This process(es) takes into account the following factors among others: Work organization and social factors, the design of work areas, routine and non-routine activities, incidents, people, changes in the organization or knowledge.</p> <p>Key hazards include:</p> <ul style="list-style-type: none"> • • <p>There is a documented, systematic and proactive methodology to assess OH&S risks as well as opportunities resulting from the identified hazards or other relevant factors.</p> <p>Key risks other than those related to the identified hazards (for example relevant organizational or strategic risks) include:</p> <ul style="list-style-type: none"> • • <p>Key opportunities to enhance OH&S performance include:</p> <ul style="list-style-type: none"> • • <p>Actions are planned to address risks and opportunities, legal requirements and potential emergency situations. They are integrated in the overall business</p>

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Agricultural Credit Policy Council	ISO 9001:2015	01 100 1934875	Re-certification Audit (25% Remote Audit & 75% On-site Audit)

Item	Audit result
	process and evaluated for their effectiveness. They take into account the hierarchy of controls as well as best practices and technological options.
Legal and other requirements Evaluation of compliance	<p>The organization has established a suitable process for identifying up to date applicable legal and other OH&S requirements at regular intervals. The organization's compliance is evaluated at determined intervals. Applicable legal requirements and the results of compliance evaluation are available as documented information.</p> <p>Relevant legal requirements are for example:</p> <ul style="list-style-type: none"> • • <p>The following examples of evidence of compliance were reviewed during the audit:</p> <ul style="list-style-type: none"> • •
Communication, participation and consultation	<p>The organization has established, implemented and maintained an appropriate process for internal and external communications relevant to the OH&S management system as well as for the consultation and participation of workers at all applicable levels and functions.</p> <p>Consultation of non-managerial workers is emphasized at all stages of the management system from the planning stage over support and operation, performance evaluation and ultimately continual improvement.</p> <p>Participation is emphasized in the determination of consultation and participation mechanisms, identification of hazards and determination of actions to eliminate them, determination of competence requirements, communication processes, control measures as well as the investigation of incidents.</p> <p>This is carried out principally by the following mechanism (i.e. health and safety committee meetings, toolbox meetings, training):</p> <ul style="list-style-type: none"> • • <p>The organization counts with the following structure of worker's representation (if applicable):</p> <ul style="list-style-type: none"> • <p>Representative for OH&S matters:</p> <p>Management legally responsible for occupational health and safety:</p> <p>Responsible for monitoring employees' health:</p> <p>The three representatives/responsibles attended/did not attend the closing meeting: reason for non-attention:</p>
Operational control including outsourced processes and contractors	<p>To comply with the requirements OH&S management system, establishes appropriate processes of control, for the elimination of hazards, the management of change as well as emergency preparedness and response.</p> <p>Particular attention is paid to procurement in general, contractors and outsourced processes in particular.</p> <p>The following contractors are relevant to the OH&S management system:</p> <ul style="list-style-type: none"> •

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Item	Audit result
	<ul style="list-style-type: none"> • <p>The following outsourced processes are relevant to the OH&S management system:</p> <ul style="list-style-type: none"> • • <p>Performance is evaluated appropriately.</p>
Incident investigation, nonconformity, corrective action and continual improvement	<p>Incidents (particularly in form of work-related injuries or illnesses and otherwise adverse effects on health) and other OH&S related nonconformities are reacted to in an appropriate manner following a process including reporting, investigation and corrective actions to be taken.</p> <p>The OH&S system is continually improved regarding OH&S performance as well as OH&S culture and participation of workers.</p> <p>The results of continual improvement are communicated to workers and evidence of improvement has been revised as documented information.</p> <p>In case of the occurrence of a serious incident or breach of regulation necessitating the involvement of the competent regulatory authority, the organization has to inform the TÜV Rheinland auditor immediately.</p>
Internal audit and management review	<p>The organization measures the implementation, maintenance and effectiveness of the management system by means of annually scheduled system audits. The organization reliably carries out these audits.</p> <p>Top management reviews the organization's management system at regular intervals and in line with the requirements to ensure its continuous suitability, adequacy and effectiveness. The management review was carried out in accordance with the requirements and was effective.</p> <p>Date of last management review: dd-mm-yyyy</p>
Use of certificate and logo	The organization uses the logo and the certificate (e.g. on business cards, company brochures, websites etc.) in compliance with the requirements.

Chapter of standard	4.1	4.2	4.3	4.4	5.1	5.2	5.3	5.4	6.1	6.2
Rating*										
No. of nonconformity										
Chapter of standard	7.1	7.2	7.3	7.4	7.5	8.1	8.2	9.1	9.2	9.3
Rating*										
No. of nonconformity										
Chapter of standard	10.1	10.2	10.3							
Rating*										
No. of nonconformity										

***Rating:** 1 = conforming
 2 = not audited in this audit

Audit Report

Client	Standard(s)	Certification Number(s)	Audit Type
Agricultural Credit Policy Council	ISO 9001:2015	01 100 1934875	Re-certification Audit (25% Remote Audit & 75% On-site Audit)

3 = nonconformity (see nonconformity report))

4 = not applicable

Client	Standard(s)	Certification Number(s)	Audit Type
Agricultural Credit Policy Council	ISO 9001:2015	01 100 1934875	Re-certification Audit (25% Remote Audit & 75% On-site Audit)

Annex ISO 50001:2018

Item	Audit result
Context of the organization	<p>The organization has determined internal and external issues related to the following topics:</p> <ul style="list-style-type: none"> • • <p>The organization has identified interested parties and the requirements of these parties. Examples for such parties are:</p> <ul style="list-style-type: none"> •
Policy/objectives	<p>The energy policy established by top management was communicated, implemented and is available to interested parties, as appropriate, in the organization at last on dd.mm.yyyy. It is suitable and includes the commitment to continual improvement and compliance with the applicable energy laws, regulations and requirements. It provides the framework for establishing and reviewing energy objectives. The organization has implemented and maintains a program for realizing the energy objectives and targets.</p> <p>Quantifiable key energy targets, which based on the organization targets, are:</p> <ul style="list-style-type: none"> • •
Energy performance and their changes since the last audit	<p>Essential energy uses are identified and their significance and impact on products and services are reviewed and updated at regular intervals (energy review last defined dd.mm.yyyy, energy baseline from dd.mm.yyyy to dd.mm.yyyy).</p> <p>The total energy consumption for the period from dd.mm.yyyy to dd.mm.yyyy amounts to the total sum (kWh) of (according to locations, if applicable):</p> <ul style="list-style-type: none"> • <p>and was divided into the following energy sources (according to locations, if applicable):</p> <ul style="list-style-type: none"> • • <p>The significant energy uses (SEUs) are (share of total energy consumption in %) (according to locations, if applicable):</p> <ul style="list-style-type: none"> • • <p>The production volume of the important products from dd.mm.yyyy to dd.mm.yyyy amounts to (if applicable):</p> <ul style="list-style-type: none"> • • <p>Adequate energy performance indicators were determined (according to locations, if applicable):</p> <ul style="list-style-type: none"> • • <p>The main planned measures in the action plans with the expected savings are (according to locations, if applicable):</p>

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Item	Audit result
	<ul style="list-style-type: none"> • • <p>The continual improvement of the energy performance has been determined identified by the following indicators and amounts to (e.g. development of energy performance indicators):</p> <ul style="list-style-type: none"> • • <p>The verification was provided by the document / the documents [TITLE] of dd.mm.yyyy.</p>
Identification and monitoring of legal and other requirements	<p>The organization identifies the relevant energy related legal and other requirements at regular intervals and makes them accessible to all relevant functions.</p> <p>The following requirements are mainly relevant for the organization (by site, where appropriate):</p> <ul style="list-style-type: none"> • •
Leadership, responsibility and authority and communication	<p>The top management demonstrates commitment with respect to the energy management system and integrates its requirements into the organization's business processes.</p> <p>The management system-related requirements regarding competence, of the people working for or on behalf of the organization as well as the roles, responsibilities and authorities are defined, documented and communicated.</p> <p>The organization has set up an effective communication process for both internal and external communication.</p>
Operational planning and control, design and procurement	<p>To comply with the energy policy and the energy objectives and targets, the organization identifies all energy-relevant operations and activities. Operations are planned and monitored.</p> <p>The organization maintains documented information for analyzing and including the impact of design (processes, products, equipment, etc.) and of procurement activities on organizations energy performance.</p>
Control of documented information	<p>The ongoing control and maintenance of documents and records regarding the energy management system is appropriate.</p>
Internal audit and management review	<p>The organization measures the implementation, maintenance and effectiveness of the management system by means of annually scheduled system audits. The organization reliably carries out these audits.</p> <p>Top management reviews the organization's management system at regular intervals and in line with the requirements to ensure its continuous suitability, adequacy and effectiveness. The management review was carried out in accordance with the requirements and was effective.</p> <p>Date of last management review: dd-mm-yyyy</p>
Use of certificate and logo	<p>The organization uses the logo and the certificate (e.g. on business cards, company brochures, websites etc.) in compliance with the requirements.</p>

Chapter of standard	4.1	4.2	4.3	4.4	5.1	5.2	5.3	6.1	6.2
Rating*									

Audit Report

Client	Standard(s)	Certification Number(s)	Audit Type
Agricultural Credit Policy Council	ISO 9001:2015	01 100 1934875	Re-certification Audit (25% Remote Audit & 75% On-site Audit)

No. of nonconformity									
Chapter of standard	6.3	6.4	6.5	6.6	7.1	7.2	7.3	7.4	7.5
Rating*									
No. of nonconformity									
Chapter of standard	8.1	8.2	8.3	9.1	9.2	9.3	10.1	10.2	
Rating*									
No. of nonconformity									

***Rating:** 1 = conforming
2 = nonconformity (see nonconformity report)