



शासकीय दिग्विजय स्वशासी स्नातकोत्तर महाविद्यालय,
राजनांदगांव (छ.ग.)


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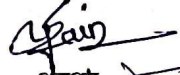
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// आंतरिक लेखा जांच समिति का प्रतिवेदन //


कार्यालय के आदेश क्रमांक ..1684.....दिनांक 21/01/22. के अनुपालन में आंतरिक लेखा जांच समिति के द्वारा शासकीय दिग्विजय महाविद्यालय में संधारित विभिन्न लेखों का परीक्षण दिनांक 01.04.2021 से दिनांक 31.12.2021 तक की अवधि का किया गया। कार्यालय द्वारा संधारित शासकीय/अशासकीय/ जनभागीदारी/ स्ववित्तिय एवं भंडार लेखों का विधिवत संधारण किया गया है।

समय-समय पर प्रविष्टियां एवं उनसे संबंधित देयकों का विधिवत रूप से संधारित किया गया है। सभी लेखों की जांच में पंजियों/सहपंजियों की जांच में सही पाया गया। जिसका सत्यापन आंतरिक लेखा जांच समिति द्वारा किया जाता है।


सदस्य
आंतरिक लेखा जांच समिति
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Principal
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Rajnandgaon (C.G.)

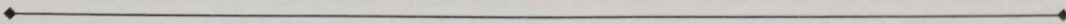


**Government Digvijay Autonomous PG College,
Rajnandgaon- 491445, Chhattisgarh, India
INTIGRATED MANAGEMENT SYSTEM MANUAL
(ISO:9001, 14001:2015 & 50001:2018)**

Dr. K.L. Tandekar – Principal

Date: 13/03/2022

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1.0 SCOPE

Scope of the College: - "Provision For Quality Assurance In Higher Education, Arts, Science, Commerce, Computer Science, Yoga & Bajmc."

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

College Profile

Govt. Digvijay Autonomous PG College (GDACR) was founded on 13th July, 1957 as a private college established by Rajnandgaon Education Society donated by revered prince Mahant Raja Digvijay Das ji. The college was taken over by the state government on 27th August 1973 and has completed SIXTY years of its glorious existence in the year 2017. In 2007, we celebrated 'Golden Jubilee Year' In year 2018, we have celebrated the 'Diamond Jubilee Year' of our institution. The growth of the institution has been remarkable. The college which started with 73 students encompasses more than 5000 students today. The College stands like a colossus, proud of thousands of alumni that adorn positions of prominence in different walks of life, thanks to the education that they received in their alma mater. The college was conferred the autonomous status by UGC in 1992-93. Our institute, which has a historical legacy and prosperous heritage, is striving hard today to adapt the new advanced technological methods of teaching-learning to compete with the global needs of present scenario. The courses, as per the need of today's competitive IT world, have been started in the college and are running successfully. The institution got CPE (College with Potential for Excellence) status by the UGC. Commerce department of our institution was declared the Centre of Excellence in the year 2005-2006 by the state government. The **Pride of our college** is that three national/international level literary personalities; Gajanand Madhav Muktibodh Dr. Padumlal Punnalal Bakshi and Dr. Baldeo Prasad Mishra; have given their contributions as faculty members in the growth of this institution

Vision

To provide quality education to the students of rural and tribal belt of the surrounding areas and to develop skills in students by keeping balance between the traditional human values and the new global challenges.

The motto of the college "*Vidya Sarvasya Bhushanam*" (*Knowledge as the ornament for all*) has been the Guiding force, the philosophical firmament and constant source of inspiration of the college ever since its Inception. The institution aims to provide higher education to as many deprived and unprivileged youth as Possible. The college community has always been dedicated to live up to the spirit of the core values of the College inspired by its motto – *Distribution of knowledge to all without any discrimination.*

DOC. NO GDACR, REV. NO. 01 Dated: 13/03/2022

Mission

To empower the students from diversified background of this region by providing them holistic education with scientific temper and logical thinking and to make them socially committed and compassionate individuals.

- To achieve integrity through excellence in teaching, learning and research.
- To involve students in community service and promote responsible leadership qualities in them.
- To promote environmental consciousness, cultural heritage, social, spiritual and human values.
- To improve employability and professional skills among the students

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Core Values

- Quality Education
- Holistic Development
- Professional Ethics
- Leadership Qualities
- Human Values

2

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 GOVERNMENT DIGVIJAY AUTONOMOUS PG COLLEGE, RAJNANDGAON, 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 GOVERNMENT DIGVIJAY AUTONOMOUS PG COLLEGE, RAJNANDGAON, 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

Approved By

Principal

0.5 COURSES OFFERED BY COLLEGE

The institution is offering –

34 courses including 7 UG courses, 18 PG courses, 2 diploma courses, 2 PG diploma courses, 4 Add-on courses And 11 certificate courses.

Departments Are; Hindi, Economics, Chemistry & Commerce; are recognized as research centers and these are conducting and promoting research work. Proposal for 5 other departments for research Centre has also been sent. At present the students' strength of the college is +5078.

Laboratories:

The institution has well equipped and effectively functional 17 laboratories and 1 central laboratory for All subjects including science laboratories viz. Physics, Chemistry, Botany, Zoology, Microbiology,

Anthropology, Geology and Biotechnology & Arts labs viz. Geography and Home Science. Other than this We have three computer Labs (in Commerce, arts & science respectively), one Sanskrit Lab, one Commerce Lab, English Language Lab & Mathematics Lab.

Central Laboratory:

We have established a central laboratory for research purpose. The laboratory is equipped with instruments (RTPCR, AAS, UV Spectrophotometer, Flame Photometer, Gel Doc, Binocular Microscope) on Soil Analysis (Micro and Macro nutrients), Water Analysis (Chemical and Physical parameters), Food Adulteration Analysis, Industrial Pollutant Analysis, Heavy Metal Analysis (like Arsenic, Mercury, Molybdenum, Zinc, Iron etc.), Plant Extraction Analysis, DNA test, Sickle Cell test, Diagnosis of Genetic Disease, Genetic Counselling, Screening of Genetic Disease, Diagnosis of Inherited Disease.

Three NCC units- NCC Boys, NCC Girls and NCC Naval are functioning in our institution. Since last 16 years

two or three cadets are participating in the RD parade every year and YEP. Near about 700 students have been selected for Armed Services till date.

The NSS unit is also active in organising various social activities. Some of these activities are: Leprosy Awareness Programmes, Cleanliness Programmes, Plantation, Environment Conservation, Water Conservation, Blood Donation, Gender Sensitization, etc.

In addition to NCC and NSS, we also have Youth Red Cross unit in our institution, which is actively involved in the activities like Blood donation, free medical check-up, Distribution of warm clothes to the poor and needy, plantation of saplings, cleanliness awareness, etc.

Distant Learning Centres:

Our Institution Has Distant Learning Study Centres Of Indira Gandhi National Open University And Sundarlal Sharma Open University. A Course Of BA In Journalism And Mass Communication Is Also Being Run In The Campus Affiliated To Kushabhau Thakre University.

Triveni Literary Museum:

Established in the Historical palace donated by Mahant Raja Digvijay Das of Rajnandgaon Estate and surrounded by water bodies from three sides, Govt. Digvijay PG Autonomous College, Rajnandgaon is famous for the renowned literary personalities like Shri Gajanan Madhav Muktibodh, Shri Padumlal Punnalal Bakshi and Shri Baldeo Prasad Mishra who have contributed their immortal works to the world

of literature during their life time. "Triveni Literary Museum" constructed on the bank of the pond to commemorate these three famous personalities reminds us of their literary contributions.

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.

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MANUAL REVISION, UPDATION AND AMENDMENT PROCEDURE

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

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

Statutory and regulatory requirements:

DOC. NO GDACR, REV. NO. 01 Dated: 13/03/2022

List of Applicable Legal Requirements

Approval of UGC

Approval of AICTE

GOVERNMENT DIGVIJAY AUTONOMOUS PG COLLEGE, RAJNANDGAON, has identified and full fill the statutory and regulatory requirements as per Central, state and other local government or regulatory requirement in legal register (GDACR-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 GDACR

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 GDACR 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 GDACR 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 GDACR at the highest level.

3.06 Effectiveness

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

3.07 IMS Policy

Intentions and direction of an GDACR, as formally expressed by its topmanagement.

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 GDACR 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 GDACR performs part of an GDACR'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. Nonconformity

Non-fulfillment of a requirement.

3.19 Corrective Action

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

3.20 Continual Improvement

Recurring activity to enhance performance.

3.21 Correction

Action to eliminate a detected nonconformity.

3.22 Involvement

Engagement in, and contribution to, shared objectives.

3.23 Context of the GDACR

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

3.24 Function

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

3.25 Customer

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

3.26 External provider

Person or GDACR that provides a product or a service.

3.27 Improvement

Any activity to enhance performance.

3.28 Management

Coordinated activities to direct and control an GDACR.

3.29 Quality Management

Management with regard to quality.

3.30 System

Set of interrelated or interacting elements.

3.31 Infrastructure

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

3.32 IMS Policy.

Policy related to IMS

3.33 Quality Policy

Policy related to quality.

3.34 Strategy

Planned activities to achieve an objective.

3.35 Object

Entity anything perceivable or conceivable.

3.36 Quality

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

3.37 Statutory Requirement

Obligatory requirement specified by a legislative body.

3.38 Regulatory Requirement

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

3.39 Defect

Nonconformity related to an intended or specified use.

3.40 Traceability

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

3.41 Innovation

Process resulting in a new or substantially changed object.

3.42 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 GDACR.

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.

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 GDACR 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

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 GDAC'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 GDACR 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 GDACR has to comply with another requirement that an GDACR has to or choose to comply with.

3.73 Life Cycle

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)

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. Digvijay Autonomous PG College, Rajnandgaon.

3.76 College

College means all the technical & professional services & responsibilities to be performed by Government Digvijay Autonomous PG College, Rajnandgaon, as specified, stated, indicated in the Syllabus.

3.77 Accident An unplanned or undesired event which can result in 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 Misses

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.

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 Government Digvijay Autonomous 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 GDACR (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 GDACR(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

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	GDACR	Government Digvijay Autonomous PG College, Rajnandgaon
2	IMS	Intigrated Management System (Quality, Environment & Energy Management System)
3	QMS	Quality Management System
4	EMS	Environmental Management System
5	OHSMS	Occupational Health And Safety Management System
6	EnMS	Energy Management System
7	BP	Business Process
8	OC	Organization Chart
9	QF	Quality Format
10	IA	Internal Audit
11	MRM	Management Review Meeting
12	NC	Non Conformance
13	CA	Corrective Action
14	PA	Preventive Action
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 GDACR 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 GDACR has defined the internal and external issues.

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

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

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

4.2 UNDERSTANDING THE NEED AND EXPECTATION OF EMPLOYEES AND INTRESTED PARTIES

The GDACR 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)

GDACR 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 GDACR-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 notice level , work safety , Pride in GDACR Timely growth	OHSA indoor air and 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	Boundary around the

	pollution, and safe and healthy environment confined space.	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, Commerce, Computer Science, Yoga & Bajmc.”

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

During determining this scope, GDACR 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
- GDACR 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 GDACR control or influence that can impact the GDACR's IMS performance.

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

Responsibility:

Top management

- IMS LEADER

4.4 INTEGRATED MANAGEMENT SYSTEM

The GDACR 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 GDACR refer in section 5.2 IMS Policy & in section.

6.2 IMS Objective

- Ensuring the integration of IMS requirement into the GDACR 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 GDACR 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 GDACR 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 GDACR 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, employee representative

The IMS policy has:

- Documented in section no 5.2 of manual. Communicated within the GDACR 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, ENVIRONMENT, HEALTH AND SAFETY POLICY

GOVERNMENT DIGVIJAY AUTONOMOUS PG COLLEGE, RAJNANDGAON, will be the Leader teaching and learning activities in India by adopting best technology available across the globe and incorporating the IMS system. GDACR 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: 13/03/2022

ENERGY POLICY (EnMS)

We at GDACR 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: 13/03/2022

5.3 GDACR roles, responsibilities and authorities

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

Employees at each level of the GDACR 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 (GDACR chart)
- Annexure IV (roles, responsibility and authority matrix)

Responsibility: Top

- managementIMS
- LEADER
- All Employees

6.1 Actions to address risks and opportunities

6.1.1 When planning for the Integrated Management System ,the GDACR 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

Integrated Management System Manual

During determining the risk and opportunities for Integrated Management System and its intended outcomes that need to be addressed, GDACR 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 GDACR 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 GDACR 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 Factor Score	Low	Medium	High
	1	2	3

Severity Factor

Severity Factor Score	Negligible	Marginal	Critical	Catastrophic
	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

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

The GDACR has establish, implement and maintain a process(es) to assess a) : IMS opportunities to enhance IMS performance, while taking into account planned changes to the GDACR, its policies, its processes or its activities and:

- 1) Opportunities to adapt work, work GDACR 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 GDACR 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 GDACR takes following in account:

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

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

Significant IMS aspects can result in risks and opportunities associated with either adverse IMS impacts (threats) or beneficial IMS impacts (opportunities). The GDACR 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 GDACR'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 GDACR has established, implemented 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 GDACR 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 GDACR has maintained and retains documented information of its compliance obligations/ legal requirement and other requirement and updated if change required.

Document ref:

- Legal Review register
- NOCs

6.1.4 Planning action

The GDACR 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 GDACR has established IMS Objectives at relevant functions, levels and processes needed for theIMS 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 wherethey 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 EveryThree 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 consumptionupto 3 % from previous year.
5. **Paper:** minimize the consumption of paper upto 10% per year
6. **Personal Safety:** Zero illness for interested parties along withworkers
7. **Energy:** Reduce the overall consumption of energy 3% ascompared to previous Year

6.2.2 Planning to achieve IMS Objectives, GDACR 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 GDACR business process.

Reference document:

- Objective Monitoring Sheet
- Management programs MRM
- Minutes

6.3 Energy review (EnMS)

GDACR develop and conduct an energy review. To

develop the energy review, GDACR is:

- a) analyses 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. GDACR 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)

GDACR determined EnPIs that:

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

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

6.5 Energy Baseline (EnMS)

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

Where GDACR has data indicating that relevant variables significantly affect energy performance, the GDACR 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 GDACR '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)

GDACR ensured that key characteristics of its operations affecting energy performance are identified, measured, monitored and analyzed at planned intervals (see 9.1). GDACR 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 GDACR ;
- 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

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

7.1 Resources

The GDACR 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 GDACR ensures that persons doing work under the GDACR'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 GDACR 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 GDACR. All process owners as well as their personnel receive periodic feedback on their areas of responsibility.

The GDACR 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	/ Interested parties	Letter / Training	Management
Importance Of effective IMS	As per Training plan / during Orientation Training	All Employees	Training / Display	Management
Responsibilities	During recruitment / Promotion /	Employee	Procedure / Oral /	Management

7.5 Documented Information

7.5.1 General

The Integrated Management System includes:

- a) Documented information required by ISO 9001:2015 , ISO 14001:2015 & ISO 50001:2018 Standard;

- b) Documented information determined by the GDACR 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:
- c) Scope of the Integrated Management System
 - d) Documented information necessary to support the operation of processes
 - e) IMS policy
 - f) 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 GDACR 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 GDACR 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 GDACR 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 GDACR 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 GDACR has coordinated the relevant parts of the Integrated Management System with the other GDACRs.

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 GDACR 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 GDACR;
- b) The GDACR 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 GDACR shall ensure that it has the ability to meet the requirements for product to be offered to Customer s. The GDACR 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 GDACR;
- d) Statutory and regulatory requirements applicable to the services;
- e) Contract or requirements differing from those previously expressed.

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

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

8.2.3.2 The GDACR 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 GDACR 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.

8.2 Design (EnMS)

GDACR 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.

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

8.3 Procurement (EnMS)

GDACR 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 GDACR's energy performance.

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

Where applicable, GDACR 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

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

8.3.2 Design & Development planning

- 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

GDACR has determined the requirements essential for Product developed. GDACR 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) GDACR standard;
- e) Potential consequences of failure due to the nature of the products and services. GDACR ensure that D & D inputs are adequate, complete and unambiguous.

Conflicting development inputs shall be resolved.

8.3.4 Design & Development controls

GDACR 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

GDACR 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

GDACR 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.

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

The GDACR determines the controls to be applied to externally provided processes, products and services. The GDACR 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 GDACR's ability to consistently deliver best in class products to the Customer.

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

The GDACR 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 GDACR;
- e) control and monitoring of the external providers' Performance to be applied by the GDACR;
- f) Verification or validation activities that the GDACR, 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 GDACR 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 GDACR shall exercise care with property belonging to Customer s or external providers while it is under the GDACR's control or being used by the GDACR. The GDACR 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 GDACR 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 GDACR shall preserve the result of test performed to the extent Necessary to ensure conformity to requirements.

8.5.5 Post-delivery activities

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

In determining the extent of post-delivery activities that are required, the GDACR 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;

8.5.6 Control of changes

The GDACR reviews and control changes for service provision, to the extent necessary to ensure continuing conformity with requirements. The GDACR 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 GDACR 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 GDACR 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 GDACR ensures that outputs that do not conform to their requirements are identified and controlled to prevent their unintended use or delivery. The GDACR 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 GDACR 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 GDACR 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 thenonconformity.
- 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 GDACR 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 GDACR retains appropriate documented information as evidence of the results.

9.1.2 Evaluation of Compliances

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

The GDACR 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 GDACR 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 GDACR 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	

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 GDACR

- 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 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 GDACR

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.

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 managementIMS
- Leader.
- Dept Head

10.1 General

The GDACR 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 GDACR 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 GDACR 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 GDACR 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 GDACR 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
- IMS Leader Plant
- supervisor

10.3 Continual improvement

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

The GDACR considers the results of analysis & evaluation, and the outputs from Management Review, to determine if there are needs & opportunities that has been

Government Digvijay Autonomous Pg College, Rajnandgaon
Integrated Management System Manual

addressed as a part of continual improvement.

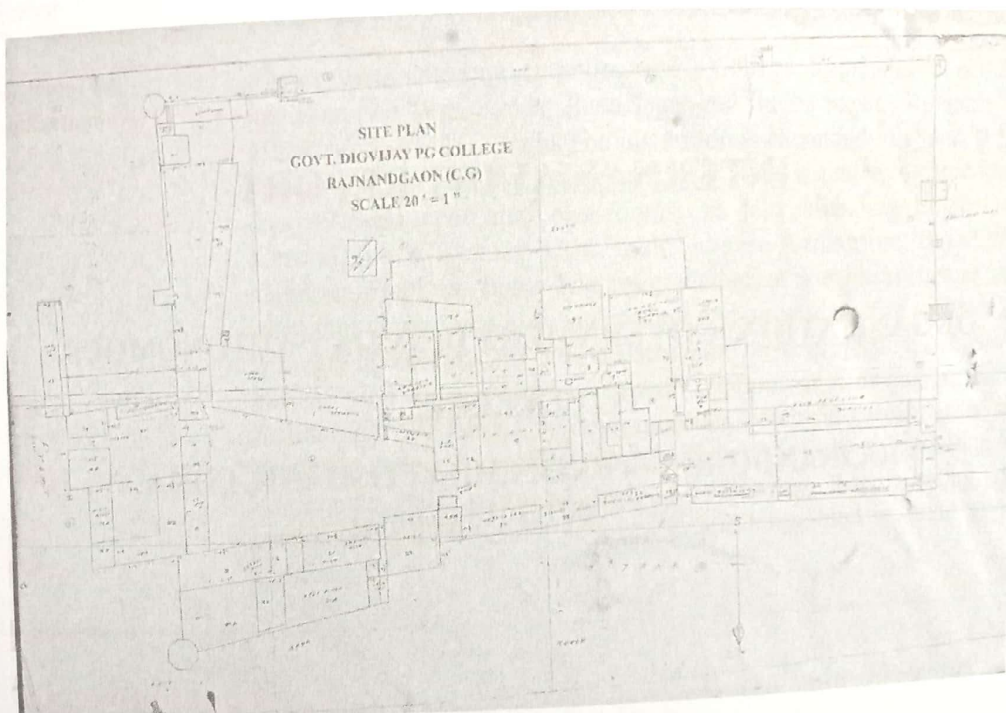
Reference documents:

- 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.



Organisation Chart: Government Digvijay Autonomous
PG College

INTERNAL AUDIT REPORT

**ORGANISATION: GOVERNMENT DIGVIJAY AUTONOMOUS
PG COLLEGE,
RAJNANDGAON- 491445, CHHATTISGARH, INDIA
ISO 50001:2018 (EnMs)**

Government Digvijay Autonomous PG College, Rajnandgaon

Name of the Organization	Government Digvijay Autonomous PG College	
Address	Government Digvijay Autonomous PG College, Killapara, Rajnandgaon, Chattisgarh-491441, India	
Scope	Provision For Quality Assurance In Higher Education, Arts, Science, Commerce, Computer Science, Yoga & Bajmc	
Audit Team	Mr. Mahendra	
Date of Audit	13.03.2022	
Temporary Site Address (If any)	None	
Technical Area Code/ Descript	No Need.	
Brief about the organization	<p>Government Digvijay Autonomous PG College, Rajnandgaon, is located in between two large Ponds- Rani Sagar and Budha Sagar., Killapara, Rajnandgaon, Chattisgarh-491441, India The institution is expanded in about 10.5 acres of land in its first part and the second part of 5 acres is under construction. The college has 49 well ventilated classrooms, 16 labs including English, Mathematics, Central Lab & Sanskrit Labs, multi-purpose Auditorium, Boys/Girls Hostel and Outdoor Track & field. The up-gradation of the infrastructure continues with changing classrooms in to smart class and up gradation of traditional blackboard into green boards. All PG departments have Projectors; we have four smar classes and one e-classroom with equipment's having modern and lates technology. We have a zoology museum, botanical garden, green house, a well established and computerized rich library, a fully AC meeting room & on conference hall, e-library, fully AC Reading Room having special sitting arrangement for research scholars & specially-abled students, Gymnasium and Canteen.</p>	

Energy Management System ISO 50001:2018

Number of Sites to be Audited? Single

Percentage of annual power requirement of the Institution met by the renewable energy sources
Response: 63.21

Annual power requirement met by renewable energy sources (in KWH) Response: 83348

Total annual power requirement (in KWH)
Response: 131852

Percentage of annual lighting power requirements met through LED bulbs Response: 50

Annual lighting power requirement met through LED bulbs (in KWH) Response: 11000

Annual lighting power requirement (in KWH) Response: 22000

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

Team Leader Declaration (Tick or cross Each Column as per applicability)

√	Auditing is based on a sampling process of the available information
√	Audit is combined, joint or integrated;
√	The effectiveness of corrective actions taken regarding previously identified nonconformities has verified
√	Outcomes are effective and complying.
√	The internal audit and management review process are effective and complying with the requirements.
√	The scope of certification is appropriate.
√	The capability of the management system to meet applicable requirements and expected
√	The audit objectives has been fulfilled and achieved.

Requirements	C/O/NCR	Comments
4.1 Understanding the organization and its context	C	Yes Ref .No. GDACR-IMSM-01 Rev-01, Issue-2, Page No-23 Verified with IMS leader
4.2 Understanding the needs and expectations of interested parties	C	Yes Ref .No. GDACR-IMSM-01 Man -01, Rev-00, Issue-2, Page No-25
4.3 Determining the scope of the energy management system	C	Yes Ref .No. GDACR-IMSM-01 Rev-00, Issue-2, Page No-27
4.4 Energy management system	C	Yes Ref .No. GDACR-IMSM-01 Discribed in IMS manual Implementation 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

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

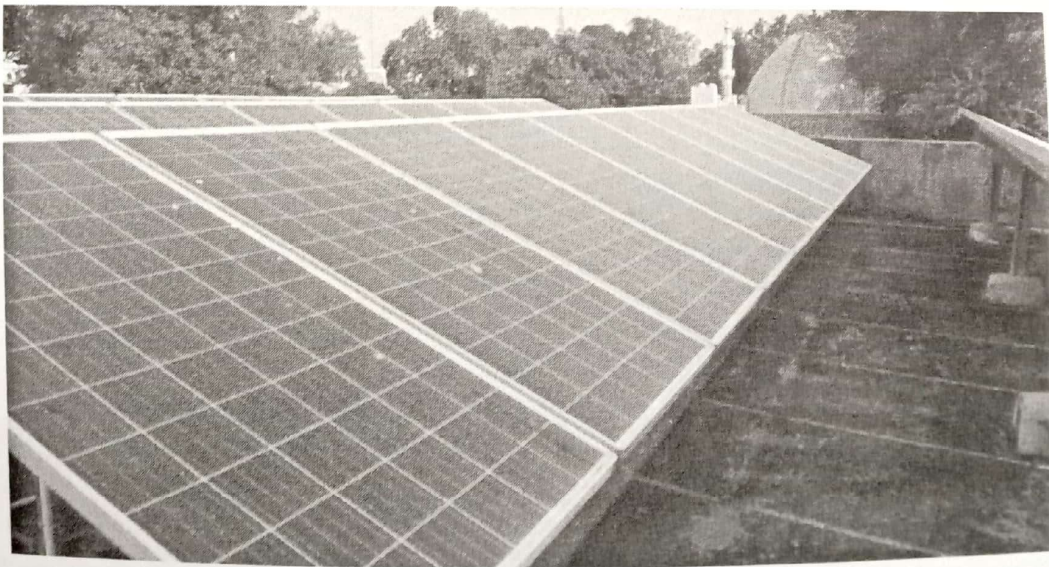
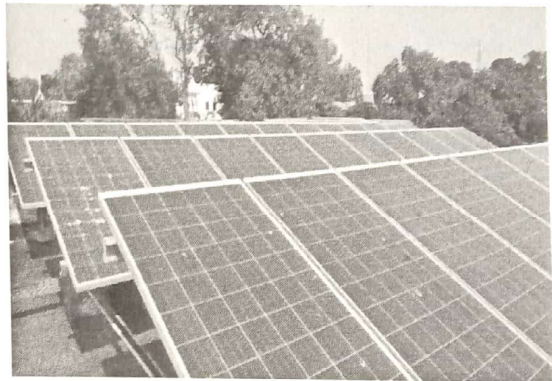
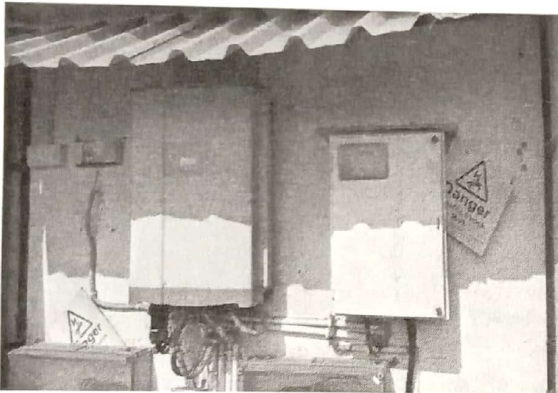
6.1 Actions to address risks and opportunities	C	Addressed in manual –Page-33 & 34 all aspects were covered.
6.2 Objectives, energy targets and planning to achieve them	C	Verified with IMR as documented on page no.38/39 of manual
6.3 Energy review	C	As planned done by IMR
6.4 Energy performance indicators	C	EPI- varies with respect to college curriculum, as the strength of students changes
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	GDACR 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.

Requirements	C/O/NCR	Comments
7.2 Competence	C	<p>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</p> <p>Ensured that these persons are competent on the basis of appropriate education, training, or experience.</p> <p>Job Profile- F607</p>
7.3 Awareness	C	<p>Yes Training was given to responsible persons and HOD's for EnMS, by external consultant, on 20th March 22, Training Record F-611</p> <p>Training Effectiveness- F-612</p>
7.4 Communication	C	<p>Yes Its generally by-E-mails, cellphones, 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>Yes Documentation is good done as they have QMS certifications already.</p> <p>Total -20 SOP's</p>
8.1 Operational planning and control	C	<p>Yes Planning Operation planning and control- MR /SOP-13 evident</p> <p>Emergency Preparedness-MR/SOP-07</p>

Requirements	C/O/NCR	Comments
8.2 Design	C	Not very Mach planned as the college is affiliated by University, courses are designed by University but teaching process is designed by teaching staff and Administration it well maintain and teaching technique is different
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 During Covid-19
9.1 Monitoring, measurement, analysis and evaluation of enerperformance and the EnMS 9.1.1 General 9.1.2 Evaluation of compliance with legal requirements andother 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 11.06.2021, by external auditor, verified followingrecords- AUDIT PLAN-F601, AUDITSCHEDULE- F602, Internal Audit Procd- MR/SOP/06
9.3 Management review	C	Last MRM conducted on 12.03.2022, 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	NA No records of CA & PA were

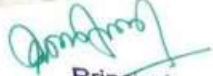
Requirements	C/O/NCR	Comments
		available
10.2 Continual improvement	C	Its Continues visible

Fig: Grid connected Solar PV Plant



We Are Glad To Declare That Govt. Digvijay Autonomous Pg College,
Is An Environment-Friendly College Along With Many Green
Development Processes That Are Fairly Practiced By The Intuition And 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.




Principal
Govt. Digvijay College
Rajnandgaon (C.G.)