



IND-EXPO CERTIFICATION LIMITED

INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME

SURVEILLANCE AUDIT REPORT

ISO 9001:2015

Stretchline Private Limited



INDEXPO CERTIFICATION LIMITED
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1. NAME OF ORGANIZATION : Stretchline Private Ltd
2. ADDRESS OF HEAD OFFICE : Lot 89, Biyagama Export processing Zone, Walgama, Malwana
3. ASSESSMENT SITE/S : Site 1 – Main Plant (Lot 82) Site 2 – Exhaust Dye house, Yarn dye, Colour lab – Lot 89 Site 3 – Covering Plant – Lot 47 Site 4 – Value Addition – Lot 64
4. CONTACT DETAILS :
4.1 Name : Ms. Nilanthi Wijegunawardena Designation : Manager – Quality Assurance
4.2 Tel : +94114828180 Mobile : +94777718065 Fax : +94114817621
4.3 E-mail : nilanthiw@stretchlinesl.com
5. NO. OF EMPLOYEES : 2020
6. APPLICABLE STANDARD : ISO 9001:2015
7. FILE NO. : IMSC-QMS-016
8. NACE CODE / SUBCATEGORY :
9. SCOPE OF CERTIFICATION: Activities pertaining to the design, development, manufacturing & selling of narrow performance fabric and covered elastomeric yarn.
10. DATE OF AUDIT & Time : 2019-07-30
11. TYPE OF AUDIT : Surveillance II
12. AUDIT TEAM :
D. N. Shantha Kuruppumullage (DNSK) Team Leader
Kumudunie Perera (KP) Team Member
Aruna Amaradasa (AA) Team Member
Mihiri Fernando (MF) Team Member
Buddhika Sajeewani (BS) Team Member

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Rev No:01

Rev Date:2018-04-10

Reviewed and approved by : Director

Issued by : Management Representative

Page 01 of 12

13. AUDIT OBJECTIVES:

The objectives of this audit were:

- to confirm that the management system complies with all the requirements of the audit standard;
- to confirm that the organization has effectively continue the planned management system;
- to verify whether there is any changes , incidence that could adversely affect the management system

14. ANY DEVIATIONS FROM THE AUDIT PLAN AND REASONS: No deviations have occurred to the audit plan

15. ANY SIGNIFICANT ISSUES IMPACTING ON THE AUDIT PROGRAMME: No significant issues impacted on the audit program

16. AUDIT FINDINGS:

16.1 CONTEXT OF THE ORGANIZATION (4 of ISO 9001:2015):

Understanding the organization and its context (4.1 of ISO 9001:2015) :

Organization has determined the external and internal issues that are relevant to purpose and strategic direction to achieve the expected results from the quality management system. The organization is also having a mechanism to monitor and review those issues.

Understanding the needs and expectations of interested parties(4.2 of ISO 9001:2015):

Organization has identified interested parties that can affect the quality management system. The requirements of these interested parties have been determined by the organization. Organization has a system of monitoring and reviewing information of those interested parties. Both internal and external interested parties related to the company scope has been identified with their associated risks.

Determining the scope of the quality management system(4.3 of ISO 9001:2015):

Organization has determined its scope based on the external and internal issues, the requirement of the interested parties, the product and services offered as well as the requirements of the ISO 9001:2015 standard.

Quality management system and its processes (4.4 of ISO 9001:2015):

Organization has established, implemented and maintained the quality management system including the processes needed and its interaction. Organization has applied all the processes required throughout the organization with required input and expected output. The organization also has established required monitoring and measurement mechanism and assigned responsibilities and authorities for each requirement. The organization reviews and evaluates these processes to achieve intended results. Based on the risk and opportunities identified by the organization, organization implement continual

DOC. NO.: QP-11-F-04

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ISSUE DATE : 2017-08-10

Rev No:01

Rev Date:2018-04-10

Reviewed and approved by : Director

Issued by : Management Representative

Page 02 of 12

INDEXPO CERTIFICATION LIMITED
INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME
SURVEILLANCE AUDIT REPORT – ISO 9001:2015

improvement processes. The quality management system is also equipped with necessary documented information.

16.2 LEADERSHIP(5 of ISO 9001:2015):

Leadership and commitment (5.1 of ISO 9001:2015):

The top management has demonstrated the leadership and commitment with respect to quality management system and was aware about their responsibilities to maintain an effective context and as per the quality policy and quality objectives established compatible with organizational context and the strategic direction of the organization.

They also committed to promote risk based thinking throughout the organization and have taken steps to adequately provide resources required and interested in achieving business objectives with continual improvement of established quality objectives. Director whom we have interviewed during the audit express the necessity of meeting the applicable statutory and regulatory requirements and customer satisfaction.

Policy (5.2 of ISO 9001:2015):

The organization has established, implemented and maintained a quality policy that can prove satisfactory application of applicable requirements and achievement of continual improvement and documented.

Organizational roles, responsibilities and authorities (5.3 of ISO 9001:2015):

Top management has delegated responsibility and authority for relevant personals and it is communicated with in the organization. Company has also assign responsibility and authority with regard to requirements of the standard ensuring that the processes are delivering there expected outputs, reporting on performance of the quality management system back to the management including opportunities for improvement.

16.3 PLANNING(6 of ISO 9001:2015):

Actions to address risks and opportunities(6.1 of ISO 9001:2015):

Company has use the issues under clause number 4.1 and the requirements under 4.2 of the standard and as determine the risk and opportunities that are arising during the planning of quality management system. These include enhance desirable effects and prevention and reduction of undesired effect while achieving the improvements. The planning also ensures integration and implementation of action in to its QMS processes with evaluation of effectiveness.

Although the risks of interested parties have identified, actions taken for mitigation are not evident. (OB 01)

Quality objectives and planning to achieve them(6.2 of ISO 9001:2015):

Quality objectives have been defined and established and are in line with the strategic direction. Quality objectives are in place and there are assigned KPIs for each personnel for each department.

Planning of Changes (6.3 of ISO 9001:2015):

Organization has a mechanism to determine the changes required to quality management system and carryout the same by planning, while considering the need for change and its expected results while ensuring the integrity of QMS.

16.4 SUPPORT(7 of ISO 9001:2015):

DOC. NO.: QP-11-F-04

ISSUE NO. : 04

ISSUE DATE : 2017-08-10

Rev No:01

Rev Date:2018-04-10

Reviewed and approved by : Director

Issued by : Management Representative

Page 03 of 12

Resources (7.1 of ISO 9001:2015):

General (7.1.1 of ISO 9001:2015):

Organization has provided required resources for establish, implement, maintain and continually improve the quality management system by considering capabilities and constrains of existing resources and needs obtained from external providers.

People (7.1.2 of ISO 9001:2015):

Organization has provided personnel required to implement the QMS effectively and for the operation and control of its processes.

Infrastructure (7.1.3 of ISO 9001:2015):

Organization has provided buildings, space for its intended operation with required utilities such as electricity, water, and information and communication technology. Company has also provided necessary equipment and vehicle required to transportation.

Environment for the operation of processes (7.1.4 of ISO 9001:2015):

Organization has provided necessary operation environment in terms of both physical and human requirement. Adequate ventilation and light for the operation are provided. Operation also complies with the sanitary requirements for staff and the visitors. General cleanliness of the environment also has been ensured. *Insulation covers are opened at the bend of steam lines leading to expose of fibre glass material to the environment and waste of energy. (OB 02)*

Monitoring and measuring resources (7.1.5 of ISO 9001:2015):

Organization has provided equipment necessary to obtain valid and reliable results such as digital weigh scales, unwinding machine and steel balls. This equipment has been controlled by regular inspection and by calibration and calibration reports are available.

Control of certain inspection and monitoring equipment is inadequate. E.g.: Colour matching cabinets of colour lab & value addition section. (OB 03)

Organizational knowledge (7.1.6 of ISO 9001:2015):

Available organizational knowledge is sufficient to provide the expected service. Opportunities are given to the staff to acquire required organizational knowledge through experience, failures and successes and also knowledge gained from experiences acquired from education, training and customers.

Competence(7.2 of ISO 9001:2015):

Organization has determined the necessary competent level of staff members based on their duties and responsibilities to avoid undesired effect on performance and effectiveness of QMS. Their education, training and experience is considered for this purpose. Where there is a gap between required competence and available competence exist, trainings are provided for both worker level employees and other staff in the organization. The trainings are categorized for staff as Manager development program/Executive development program and 12 day training program is carried out for new recruits. 360 degree training evaluation is done for both technical skill trainings and soft skill trainings. All training records are available in soft form.

INDEXPO CERTIFICATION LIMITED
INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME
SURVEILLANCE AUDIT REPORT – ISO 9001:2015

Awareness (7.3 of ISO 9001:2015):

The organization has given awareness to all the staff members on quality objectives, their contribution to the effectiveness to the quality management system and the implications of not conforming QMS requirements.

Communication (7.4 of ISO 9001:2015):

The organization has determined internal and external communication relevant to quality management system to different staff members depending on the responsibilities and authority down the hierarchy.

Documented information(7.5 of ISO 9001:2008):

Company has identified documented information required by the standard and documents required to be apply for effectiveness of QMS. Company has established a documented information control system for both documents and records.

16.5 OPERATION (8 of ISO 9001:2015):

Operational planning and control (8.1 of ISO 9001:2015):

Company has planned, implemented and controlled the processes required to control the service and product provision. Company operates according to three shifts. Company has established relevant criteria for the processes and the acceptance of service and products. As well as organization has controlled planned changes and it has noticed they have been reviewed the consequences of unintended changes and actions has taken to mitigate the same.

Requirements for products and services (8.2 of ISO 9001:2015):

Customer communication(8.2.1 of ISO 9001:2015):

Company has been adequately addressed customer communication as it is important to their activities. Company provides information to their customers regarding to their products. Customer complaints and enquiries have been handled in appropriate manner.

Determining the requirements for products and services (8.2.2 of ISO 9001:2015):

Company has considered about statutory and regulatory requirements when defining the requirements for product and services. Other than that, customer/buyer requirements are also given priority.

Review of the requirements for products and services (8.2.3 of ISO 9001:2015):

The customer's requirement has confirmed by the company before acceptance of the customer order and conducts review prior to committed supply product to customers.

Changes to requirements for products and services (8.2.4 of ISO 9001:2015):

When amendment is required due to customer made aware of changing requirement for products company has ensured to change such requirement and amend the relevant documented information.

Design and development of products and services (8.3 of ISO 9001:2015):

There is no design and development processes are carried out since all the related activities are provided by the customer as customer requirements.

Control of externally provided processes, products and services (8.4 of ISO 9001:2015):

General (8.4.1 of ISO 9001:2015):

DOC. NO.: QP-11-F-04 ISSUE NO. : 04
Rev No:01

Reviewed and approved by : Director

ISSUE DATE : 2017-08-10
Rev Date:2018-04-10

Issued by : Management Representative
Page 05 of 12

The organization has ensured the control of externally provided services including outsourced processes, purchasing, etc. Criteria for the evaluation, selection, monitoring of performance and re-evaluation of such activities has been established and documented information of those activities are retained and controlled.

There is no evidence of proper agreement for certain external service providers. E.g.: Catering service- Sisila Lanka, Food waste collection, Pest control service provider. (NCR 01)

Type and extent of control (8.4.2 of ISO 9001:2015):

Externally provided processes remained within the organization under controlled condition and verification of same has been carried out as it is necessary to ensure that the externally provided processes meet requirements of the organization.

Information for external providers (8.4.3 of ISO 9001:2015):

Organization has ensured the adequacy of requirements prior to communication to the external providers and company provided necessary information regarding the processes, product and services to be provided, competency requirement, etc.

Production and service provision (8.5 of ISO 9001:2015):

Control of production and service provision(8.5.1 of ISO 9001:2015):

Production and service provision is carried out under controlled conditions.

Identification and traceability (8.5.2 of ISO 9001:2015):

The organization has used various techniques in order to identify outputs to ensure the conformity of products. Batch records are available for each production units. *However there are several type of goods. (E.g.: finished good, return good, trial batch) are kept at finished stores. (OB 04)*

Property belonging to customers or external providers (8.5.3 of ISO 9001:2015):

Sample of sock pairs are kept as property of the customers. Any item that is brought from outside by the customer will be recorded, preserve (if required) and kept with required identification and traceability until it is being used and handed over to the customer after completion of the function.

Preservation (8.5.4 of ISO 9001:2015):

The organization has identified, handled, stored, and protected the outputs during production, to the extent necessary to ensure conformity to requirements.

Post-delivery activities (8.5.5 of ISO 9001:2015):

There are no post-delivery activities involved for the products.

Control of changes (8.5.6 of ISO 9001:2015):

When changes required for production, organization has reviewed requirement of the same and documented information has been retained under controlled condition.

Release of products and services (8.6 of ISO 9001:2015):

The organization has implemented incoming inspection of raw materials, process inspections and final inspection to verify that the product requirements have been met. The release of products to the customer has proceeded once the above arrangements have been satisfactorily completed.

DOC. NO.: QP-11-F-04

ISSUE NO. : 04

ISSUE DATE : 2017-08-10

Rev No:01

Rev Date:2018-04-10

Reviewed and approved by : Director

Issued by : Management Representative

Page 06 of 12

Control of nonconforming outputs (8.7 of ISO 9001:2015):

When the product does not ensure required output, organization has controlled to prevent their unintended use or delivery to the customers. The organization has taken appropriate actions to correct the nonconformity and segregation of nonconforming products. The organization has retained documented information regarding nonconforming situation and it is describes the nonconformity, action taken and identifies the authority declining the action in respect of the nonconformity.

16.6 PERFORMANCE EVALUATION (9 of ISO 9001:2015):

Monitoring, measurement, analysis and evaluation (9.1 of ISO 9001:2015):

General (9.1.1 of ISO 9001:2015):

The organization has determined what needs to be monitored and measured, the methods for monitoring, measurement, analysis.

Customer satisfaction (9.1.2 of ISO 9001:2015):

Customer survey, customer feedback and meeting with customer have been identified as essential requirements for the evaluation of customer satisfaction. Several customers have responded to the customer satisfaction survey results are analysed.

Analysis and evaluation (9.1.3 of ISO 9001:2015):

Organization has implemented a process to analyse and evaluate the data and evaluation obtains from monitoring and measurement activities. Such as customer complaints, customer satisfaction, performance of external providers, risk analysis.

Internal audit (9.2 of ISO 9001:2015):

Internal audit is conducted annually, from June to July covering all the main sections including stores, processing, research and innovation, HR, value addition, quality and purchasing. Proper root cause analysis has been carried out and corrective actions are taken without delay. Internal audit report was available.

Management review (9.3 of ISO 9001:2015):

Management review meeting has carried out annually as planned. All the inputs for conducting management review meeting minutes are stipulated in the standard have been discussed in the Management review meeting.

16.7 IMPROVEMENT (10 of ISO 9001:2015):

General (10.1 of ISO 9001:2015):

Company has determined and selected opportunities for improvement and implemented necessary actions to meet customer requirements and to increase customer satisfaction.

Nonconformity and corrective action (10.2 of ISO 9001:2015):

Company has taken necessary actions to addressed nonconformities and corrective actions have been implemented for such nonconformities. Company has retained documented information as evidence of the nature of the NC and any subsequent action taken and results of corrective action taken.

It is observed that certain delivery to Mas Active have been returned due to handling damage and there is no evidence for any action taken. (NCR 02)

Continual improvement (10.3 of ISO 9001:2015):

DOC. NO.: QP-11-F-04

ISSUE NO. : 04

ISSUE DATE : 2017-08-10

Rev No:01

Rev Date:2018-04-10

Reviewed and approved by : Director

Issued by : Management Representative

Page 07 of 12

INDEXPO CERTIFICATION LIMITED
INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME
SURVEILLANCE AUDIT REPORT – ISO 9001:2015

Company is committed to continually improve the effectiveness of the management system through the use of quality policy, quality objectives, and audit results, analysis of data, management review, and corrective implementation.

17. APPLICABLE LEGAL REQUIREMENTS: Shop and office act, legal and statutory requirements

18. ANY UNRESOLVED ISSUES: None

19. REVIEW OF PREVIOUS AUDIT REPORT & VERIFICATION OF EFFECTIVENESS OF CORRECTIVE ACTIONS FOR PREVIOUSLY IDENTIFIED NON- CONFORMITIES: Previous audit reports and effectiveness of the corrective actions were verified at the audit.

20. USE OF LOGO: Logo can be used as per the terms and conditions of the certification body.

21. OVERALL CONCLUSION OF THE AUDIT

Audit is based on a sampling process of the available information at the point of auditing and the audit methods used were interviews, observation of activities and review of documentation and records. With consideration to the findings identified on the report the overall conclusions of the audit are as follow:

- The management system documentation demonstrated conformity with the requirements of the audit standard and provided sufficient structure to support implementation and maintenance of the management system. YES NO
- The organization has demonstrated effective implementation and maintenance /improvement of its management system. YES NO
- The organization has demonstrated the establishment and tracking of Appropriate key performance objectives and targets and monitored progress towards their achievement. YES NO
- The internal audit program has been fully implemented and demonstrates effectiveness as a tool for maintaining and improving the management system. YES NO
- The management review process demonstrated capability to ensure the continuing suitability, adequacy and effectiveness of the management system. YES NO
- Throughout the audit process, the management system demonstrated overall conformance with the requirements of the audit standard. YES NO

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 Rev No:01
 Reviewed and approved by : Director

ISSUE DATE : 2017-08-10
 Rev Date:2018-04-10
 Issued by : Management Representative
 Page 08 of 12

22. MAJOR NON-CONFORMITIES: None

23. MINOR NON-CONFORMITIES:

1. There is no evidence of proper agreement for certain external service providers. E.g.: Catering service-Sisila Lanka, Food waste collection, Pest control service provider. (NCR 01)
2. It is observed that certain delivery to Mas Active have been returned due to handling damage and there is no evidence for any action taken. (NCR 02)

25. OPPORTUNITIES FOR IMPROVEMENT:

1. Although the risks of interested parties have identified, actions taken for mitigation are not evident. (OB 01)
2. Insulation covers are opened at the bend of steam lines leading to expose of fibre glass material to the environment and waste of energy. (OB 02)
3. Control of certain inspection and monitoring equipment is inadequate. E.g.: Colour matching cabinets of colour lab & value addition section. (OB 03)
4. There are several type of goods. (E.g.: finished good, return good, trial batch) are kept at finished stores. (OB 04)

26. RECOMENDATION FROM AUDIT TEAM:

(Strike off which is not relevant)

The audit team concludes that the organization has / ~~has not~~ established and maintained its management system in line with the requirements of the standard and demonstrated the ability of the system to systematically achieve agreed requirements for products / ~~services~~ within the scope and the organization's policy and objectives.

Therefore the audit team recommends that, based on the results of this audit and the system's demonstrated state of development and maturity, management system certification be:

~~Granted~~ / continued the certification subjected to the completion and subsequent verification of corrective action for all major/minor non conformities raised / ~~Suspended~~ until satisfactory corrective action is completed.

ANY OTHER COMENTS:

.....
SIGNATURE OF LEAD AUDITOR

.....
DATE

DOC. NO.: QP-11-F-04

ISSUE NO. : 04
Rev No:01

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ISSUE DATE : 2017-08-10

Rev Date:2018-04-10

Issued by : Management Representative

Page 09 of 12



INDEXPO CERTIFICATION LIMITED
INTEGRATED MANAGEMENT SYSTEMS CERTIFICATION SCHEME
SURVEILLANCE AUDIT REPORT - ISO 9001:2015

• This page is for internal purposes only.

27. RECOMMENDATION BY AUDIT TEAM :

Recommended for continuation of certificate, on satisfactory completion of corrective action.

[Signature]
 Signature of Team leader

Date

2019-07-30

Date

[Signature]
 Signature of Team Member - 1

2019-07-30

Date

[Signature]
 Signature of Team Member - 2

28. RECOMMENDATION BY CERTIFICATION MANAGER:

All NCRs have been closed.

is recommended for continuation of certificate.

[Signature]
 Signature of Certification Manager

Date

2019/09/04

29. APPROVAL FOR SUBMISSION TO THE CERTIFICATION COMMITTEE:

Approved.

[Signature]
 Signature of Director

Date

04-09-2019

DOC. NO.: QP-11-F-04

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Rev No:01

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ISSUE DATE : 2017-08-10

Rev Date:2018-04-10

Issued by : Management Representative

Page 010 of 12