Assessment Report
Stage 1

Fakultas Ilmu Sosial dan Ilmu Politik UIN Raden Fatah Palembang

Assessment dates	06/10/2021 to 06/10/2021 (Please refer to Appendix for details)
Assessment Location(s)	Palembang (000)
Report Author	Eko Purwanto
Assessment Standard(s)	ISO 9001:2015

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Executive Summary

Top management has shown commitment to implement ISO 9001: 2015 quality management system. The requirements of quality management system have been addressed and implemented. The organization is recognized ready for the stage 2 audit and its effective planning.

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Changes in the organization since last assessment

There is no significant change of the organization structure and key personnel involved in the audited management system.

No change in relation to the audited organization's activities, products or services covered by the scope of certification was identified.

There was no change to the reference or normative documents which is related to the scope of certification.

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NCR summary graphs

There have been no NCRs raised.

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Your next steps

NCR close out process

No new nonconformities were identified during the assessment. Enhanced detail relating to the overall assessment findings is contained within subsequent sections of the report.

Please refer to Assessment Conclusion and Recommendation section for the required submission and the defined timeline.

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Assessment objective, scope and criteria

The objective of the assessment was to determine the organisation's readiness for the stage 2 audit and to ensure its effective planning.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2015 and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

ISO 9001:2015
Fakultas Ilmu Sosial dan Ilmu Politik UIN Raden Fatah Palembang management system documentation

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Assessment Participants

Name	Position	Opening Meeting	Closing Meeting	Interviewed(processes)
Prof. Dr. H. Izomiddin, MA	Dekan FISIP	X	X	X
Dr. Yenrizal, S.Sos, MSi	Wakil Dekan I FISIP	X	X	X
Ainur Ropik, S.Sos.I., M.Si	Wakil Dekan II FISIP	X	X	X
Dr. Kun Budianto, S.Ag., SH., M.Si	Wakil Dekan III FISIP	X	X	X
Mahdi Zanapel, SH	Kabag FISIP	X	X	
Dr. Eti Yustina, S.Ag., M.H.I	Kaprodi ILPOL	X	X	
Reza Aprianti, MA	Kaprodi ILKOM	X	X	
Eraskaita Ginting, M.I.Kom	Sekprodi ILKOM	X	X	
Ryllian Chandra Eka Viana, MA	Sekprodi ILPOL	X	X	
M. Mifta Farid, M.I.Kom	Dosen ILKOM	X	X	
Putri Citra Hati, M.Sos	Dosen ILKOM	X	X	
Badaruddin Azarkasyi, SE., MM	Dosen ILKOM	X	X	
Raegen Harahap, B.A., MA	Dosen ILPOL	X	X	
Norma Juainah, MSi	Dosen ILPOL	X	X	
Eko Bagus Solihin, MA	Dosen ILPOL	X	X	
Sepriadi Saputra, M.I.Kom	Dosen ILPOL	X	X	

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Assessment conclusion

BSI assessment team

Name	Position
Eko Purwanto	Team Leader

Assessment conclusion and recommendation

The audit objectives have been achieved and the certificate scope remains appropriate. The audit team concludes based on the results of this audit that the organization does fulfil the standards and audit criteria identified within the audit report and it is deemed that the management system continues to achieve its intended outcomes.

Based on the outcome of this Stage 1 Assessment, the Assessment Team / Auditor recommends proceed to Stage 2 Assessment – No additional information is required

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Findings from this assessment

Top Management & Management System:

Auditee: Prof. Dr. H. Izomiddin, MA, Dr. Yenrizal, M.Si and Team
Clause: 4 - 10

Confirmation of the scope of activity to be covered of ISO 9001:2015, as following:

- Organization name:
Fakultas Ilmu Sosial dan Ilmu Politik UIN Raden Fatah Palembang

- Address:
Jalan Prof. K.H Zainal Abidin Fikri KM 3,5 Palembang
Sumatera Selatan 30126
Indonesia

- Confirm scope is: The provision of educational services for Program Studi Ilmu Politik and Program Studi Ilmu Komunikasi
- BSI Code: T68

Confirmation of assessment duration, resourcing requirements for initial assessment visit confirmed to be total 3 mandays : Stage 1 is 1 manday and stage 2 is 2 mandays.

Confirmation of implementation time of the system to be audited. System and documentation ISO 9001:2015 have been implemented since 1 July 2020.

Areas to be assessed:
1. Top Management & management system
2. Tata Usaha (include competency)
3. Sarana dan Prasarana (include procurement)
4. Perpustakaan
5. Laboratorium
6. Prodi Ilmu Komunikasi
7. Prodi Ilmu Politik

Interview with Top Management (Mr. Yenrizal)
The Top Management has demonstrated a strong commitment to the implementation and continual improvement of the QMS in meeting with their customers requirements based on ISO 9001:2015. The implementation of ISO 9001:2015 is aimed to produce excellent and professional graduates, meet the needs and satisfy all stakeholders by carrying out continuous improvement through the implementation of the Quality Management System.

Evidence:
4.1 Understanding the organization and its context, 4.2 Understanding the needs and expectations of interested parties
Internal issues, external issues and the needs and expectations of interested parties have been identified and available on SWOT Analysis in Rencana Strategis Fakultas Ilmu Sosial dan Ilmu Politik UIN Raden Fatah Palembang 2020-2024 tanggal 10 Agustus 2020. Several issued are identified through the interview with the management, those issued are related to the regulation (internal and external), technology relating to the implementation of information technology in the learning program during this

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COVID-19 pandemic, competency of the lecturer, etc.

4.3 Determining the scope of the quality management system
Scope of quality management system is determined in SPMI (Quality Manual).

4.4 Quality management system and its processes
Processes necessary for management system has been determined in Rencana Strategi Bisnis 2020-2025 and SOPs of FISIP UIN Raden Fatah Palembang.

5.1 Leadership.
The Top Management (Dean) has shown his commitment by signing the Policy, promote continual improvement, support the organization to fulfill resources necessary for the operation, also participate in meetings and the management system audits.

5.2 Policy
- Quality Policy was described in the Kebijakan Mutu FISIP UIN Raden Fatah Palembang dated 1 Juli 2020. The policy is "Fakultas Ilmu Sosial dan Ilmu Politik (FISIP) UIN Raden Fatah Palembang berkomitmen tinggi untuk menghasilkan alumni yang unggul dan professional, memenuhi kebutuhan dan memuaskan semua pemangku kepentingan FISIP dengan melaksanakan perbaikan secara kontinu melalui penerapan Sistem Penjaminan Mutu Internal-SPMI (audit mutu internal berkala) dan sistem Penjaminan Mutu Eksternal-SPME (akreditasi dan ISO 9001:2015)".
- Quality policy communicated to employees through communication channels such as signboard, socialization, monthly briefing, etc.

5.3 Organizational roles, responsibilities and authorities.
Organizational roles, responsibilities and authorities of the personel has been described in:
- Uraian tugas berdasarakan Peratutan Menteri Agama republik indonesia nomor. 53 Tahun 2015 tentang organisasi dan tata kerja UIN Raden Fatah Palembang.
- Struktur Organisasi berdasarkan Surat Keputusan Dekan FISIP UIN Raden Fatah Palembang no.B.853/Un.09/Kp.02/08/2020 tanggal 12 Agustus 2020.
- Uraian Tugas berdasarkan Surat Keputusan Dekan FISIP UIN Raden Fatah Palembang no.854 Tahun 2020 tanggal 12 Agustus 2020 tentang Jobdes Pimpinan dan Staff FISIP UIN Raden Fatah Palembang.

6.1 Actions to address risks and opportunities
Actions to address risks and opportunities was described in SWOT Analysis in Rencana Strategis Fakultas Ilmu Sosial dan Ilmu Politik UIN Raden Fatah Palembang 2020-2024. Risk identified such as: Academic services that are not yet effective, integrated and based on IT. Opportunity identified such as: Creating an internal support system for lecturers to support each other in accessing scholarships and holding sharing sessions for lecturers to get scholarships both at home and abroad.

6.2 Quality objectives and planning to achieve them / 9.1.3 Analysis and evaluation
Quality objectives was described in Sasaran Mutu FISIP UIN Raden Fatah Palembang tanggal 1 Juli 2016. Quality objective such as:
- The number of graduates who study on time for 8 semesters of at least 80% in 2019;
- Graduates working in the community according to their field of expertise in the first year at least 70% in 2020;
- Graduates are able to apply information technology by showing a minimum certificate of "B" value of at least 90% in 2021;
- Lecturer performance is good with evidence of achievement of lecturer performance index 3.0 at least 90%.

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6.3 Planning of changes / 8.5.6 Control of change
Changes related to management system reviewed and communicated in weekly meetings and management review meeting.

7.1 Resources, 7.1.1 General; 7.1.2 People; 7.1.3 Infrastructure; 7.1.4 Environment for the operation of processes; 7.1.5 Monitoring and measuring resources.
Personnel and Lecturer has been appointed and available for the implementation of management system, shown in Peraturan Menteri Agama Republik Indonesia nomor. 53 Tahun 2015 tentang Organisasi dan Tata Kerja UIN Raden Fatah Palembang.
Infrastructure and environmental aspect such as classroom, chair, table, air conditioner, fan, library, laboratory and the facility has been determined and maintained, described in Buku Kendali Perawatan dan Pemeliharaan Ruang Belajar FISIP UIN Raden Fatah Tahun 2021, Permohonan Perbaikan Gedung and Daftar Inventaris Alat Tes Laboratorium terpadu FISIP for Laboratorium Facility.
Monitoring and measuring resources determined in SOP Evaluasi Kinerja Dosen and SOP Penyesuaian Kenaikan Pangkat (UPKP).

7.1.6 Organizational knowledge; 7.2 Competence
The Lecturers has been appointed based on their base of competence, the training has been conducted to ensure the competence of lecturers such as Pelatihan Tracer Study, Video and Animation Based Learning Material Development, Optimize Mendeley as Reference Tool Manager and Database, etc.

7.3 Awareness and 7.4 Communication
Communication media has been provided such as email (individual and group) for internal and external communication, also online system SILAYAK (Sistem Informasi Layanan Akademik) as communication media between lecturers and students for share the course material, literature, and research result.

7.5 Documented information
Document information has been determined in SOP Pengendalian Dokumen dan Data (SOP-FISIP-019). Documented information such as Curriculum Guidelines, SOPs, and RPS has been established. Control of archive (Surat Keterangan Aktif Kuliah, Surat Keterangan Lulus Komprehensif, Surat Keterangan Izin Penelitian, SK Dosen Pembimbing) has been implemented by store the archive in safeguarded archive storage and online system SILAYAK for minimum retention time of 5 years.

8.1 Operational planning and control; 8.5. Production and service provision; 8.6 Release of products and services
Operation planning and control has been established in Pedoman Kurikulum FISIP UIN Raden Fatah Palembang and RPS (Rencana Pembelajaran Semester).
Realization of the planning are described:
- Rekapitulasi Nilai Mata Kuliah Semester Ganjil Tahun Ajaran 2020/2021
- Rekapitulasi Presensi Dosen Semester Ganjil
- Rekapitulasi Presensi Mahasiswa
- Rekapitulasi Rencana Pembelajaran Semester
- Soal UTS & UAS
- Evaluasi Dosen Oleh Mahasiswa

8.2 Requirements for products and services
Requirement for services has been described reviewed and established based on requirement from:
- BAN-PT --> Accreditation Body for College
- Ministry of Religion --> Regulatory Body
The operational processes of FISIP UIN Raden Fatah Palembang refer to some regulations and procedure as follows:

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- Peraturan Pemerintah No.4 Tahun 2014 tentang Penyelenggaraan Pendidikan Tinggi dan Pengelolaan Perguruan Tinggi.
- Peraturan Pemerintah No.129 Tahun 2014 tentang Perubahan Institut Agama Islam Negeri Raden Fatah Palembang menjadi Universitas Islam Negeri Raden Fatah Palembang.
- Peraturan Menteri Agama No.53 Tahun 2015 tentang Organisasi dan Tata Kerja Universitas Islam Negeri Raden Fatah Palembang.
- Peraturan Menteri Agama No.62 Tahun 2015 tentang Statuta Universitas Islam Negeri Raden Fatah Palembang.

8.3 Design and development
Design and Development process has been conducted for making curriculum design by combining of the requirement Ministry of Religion, Kemenag (Learning Achievement), Ristekdikti (RPS Table Format), described in Notulen Rencana Pembelajaran Semester (RPS) 2020/2021.

8.4 Control of externally provided processes, products and services ; *8.4.1 General ; *8.4.2 Type and extent of control ; *8.4.3 Information for external providers
Control for externally provided product such as computer, Laboratory facility and stationary has been established by checking the product provided and made "Berita Acara Pemeriksaan Barang"
Control for externally provided service such as LB Lecturers are conducted by reviewing the attendance list of the lecturers and monitoring and evaluation of GPMP.

8.7 Control of nonconforming product and services
Control of nonconforming product and services was stated in SOP Tindakan Perbaikan (SOP-FISIP-23).

9.1 Monitoring, measurement, analysis and evaluation
Monitoring of learning activities has been conducted by monitoring and evaluation (Monev) carried out by GPMP (Gugus Penjamin Mutu Prodi --> for specific learning activities) and GPMF (Gugus Penjamin Mutu Fakultas --> for generally processes and infrastructure in Faculty).
Customer satisfaction and feedback has been carried out by Survey Kepuasan Mahasiswa (Feedback from student) and Tracer Study (Feedback from scholar and stakeholder).

9.2 Internal audit
In general activity of internal audit was described on Pedoman Audit Mutu Internal UIN Raden Fatah Palembang. Internal Audit program has been established in annual basis. Internal Audit has been carried out and finished in 29 September 2021, total 3 NCs and 7 Observations has been detected and still in progress for corrective action.

9.3 Management review
In general activity of management review meeting was described in SOP Tinjauan Manajemen (SOP-FISIP-021). Management review planned at least annually. The latest Management was conducted on 29 Maret 2021. The agendas were meet with the Standard.

10. Improvement - Nonconformity and corrective action
Continual Improvement process can be shown based on input of Monitoring and Evaluation (Monev), Customer Feedback, from the implementation of correction and corrective action as result of nonconforming product and services, internal audit and management review process.

Conclusion: Quality management system have been implemented by the organization, and recommendation is can be proceeded for stage 2 audit.

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Area of Concern:
1. Manual Mutu dan Sasaran Mutu sudah tidak up to date karena masih mengacu pada dokumen tanggal 1 Juli 2016.

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Next visit objectives, scope and criteria

The objective of the assessment is to conduct a certification assessment to ensure the elements of the proposed scope of registration and the requirements of the management standard are effectively addressed by the organisation's management system and to confirm the forward strategic plan.
If this visit is part of a multi-location assessment, the final recommendation will be contingent of the findings from all assessments.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2015 and the defined assessment plan provided in terms of locations and areas of the system and organisation to be assessed.

ISO 9001:2015
Fakultas Ilmu Sosial dan Ilmu Politik UIN Raden Fatah Palembang management system documentation

Please note that BSI reserves the right to apply a charge equivalent to the full daily rate for cancellation of the visit by the organisation within 30 days of an agreed visit date.

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Next Visit Plan

Date	Auditor	Time	Area/Process	Clause
	Assessor 1		Top Management & Management System	4-10
			Tata Usaha (include competency)	6-10
			Sarana dan Prasarana (include procurement)	6-10
			Perpustakaan	6-10
	Assessor 2		Laboratorium	6-10
			Prodi Ilmu Komunikasi	6-10
			Prodi Ilmu Politik	6-10

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Appendix: Your certification structure & ongoing assessment programme

Scope of Certification

FS 759267 (ISO 9001:2015)

The provision of educational services for Program Studi Ilmu Politik and Program Studi Ilmu Komunikasi

Assessed location(s)

The audit has been performed at Central Office, Permanent Locations.

Palembang / FS 759267 (ISO 9001:2015)

Location reference	0047834406-000
Address	Fakultas Ilmu Sosial dan Ilmu Politik UIN Raden Fatah Palembang Jalan Prof. K.H Zainal Abidin Fikri KM 3,5 Palembang Sumatera Selatan 30126 Indonesia
Visit type	Stage 1 Audit
Assessment reference	3555344
Assessment dates	06/10/2021
Deviation from Audit Plan	No
Total number of Employees	36
Effective number of Employees	36
Scope of activities at the site	Main Certificate Scope applies.
Assessment duration	1 day(s)

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Certification assessment program

Certificate Number - FS 759267
Location reference - 0047834406-000

		Audit1	Audit2
Business area/Location	**Date (mm/yy):**	10/21	11/21
	Duration (days):	1	2
Top Management & Management System		X	X
Tata Usaha (include competency)			X
Sarana dan Prasarana (include procurement)			X
Perpustakaan			X
Laboratorium			X
Prodi Ilmu Komunikasi			X
Prodi Ilmu Politik			X

Justified exclusions / non applicable clauses

There are no justified exclusions / non applicable clauses of the standard for certificate : FS 759267

Expected outcomes for accredited certification.

What accredited management system certification means?

To achieve an organization's objectives related to the Expected Outcomes intended by the management systems standard, the accredited management system certification is expected to provide confidence that the organization has a management system that conforms to the applicable requirements of the specific ISO standard.

In particular, it is to be expected that the organization

• has a system which is appropriate for its organizational context and certification scope, a defined policy appropriate for the intent of the specific management system standard and to the nature, scale and impacts of its activities, products and services over their lifecycles, is addressing risks and opportunities associated with its context and objectives;
• analyses and understands customer needs and expectations, as well as the relevant statutory and regulatory requirements related to its products, processes and services;
• ensures that product, process and service characteristics have been specified in order to meet customer and applicable statutory/regulatory requirements;
• has determined and is managing the processes needed to achieve the Expected Outcomes intended by the management system standard;
• has ensured the availability of resources necessary to support the operation and monitoring of these products, processes and services;

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• monitors and controls the defined product process and service characteristics;
• aims to prevent nonconformities, and has systematic improvement processes in place including the addressing of complaints from interested parties;
• has implemented an effective internal audit and management review process;
• is monitoring, measuring, analysing, evaluating and improving the effectiveness of its management system and has implemented processes for communicating internally, as well as responding to and communicating with interested external parties.

What accredited management systems certification does not mean?
It is important to recognize that management system standards define requirements for an organization's management system, and not the specific performance criteria that are to be achieved (such as product or service standards, environmental performance criteria etc).

Accredited management systems certification should provide confidence in the organization's ability to meet its objectives related to the intent of the management system standard. A management systems audit is not a full legal compliance audit, and does not necessarily ensure ethical behaviour or that the organization will always achieve 100% conformity and legal compliance, though this should of course be a permanent goal.

Within its scope of certification, accredited management systems certification does not imply or ensure, for example:
• that the organization is providing a superior product and service, or
• that the organization's product and service itself is certified as meeting the requirements of an ISO (or any other) standard or specification.

Definitions of findings:

Non-conformity:
Non-fulfilment of a requirement.

Major nonconformity:
Nonconformity that affects the capability of the management system to achieve the intended results. Nonconformities could be classified as major in the following circumstances:
•   If there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements;
•   A number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.

Minor nonconformity:
Nonconformity that does not affect the capability of the management system to achieve the intended results.

Opportunity for improvement:
It is a statement of fact made by an assessor during an assessment, and substantiated by objective evidence, referring to a weakness or potential deficiency in a management system which if not improved

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may lead to nonconformity in the future. We may provide generic information about industrial best practices but no specific solution shall be provided as a part of an opportunity for improvement.

Observation:

It is ONLY applicable for those schemes which prohibit the certification body to issue an opportunity for improvement.

It is a statement of fact made by the assessor referring to a weakness or potential deficiency in a management system which, if not improved, may lead to a nonconformity in the future.

How to contact BSI

Visit the BSI Connect Portal, our web-based self-service tool to access all your BSI assessment and testing data at a time that's convenient to you. View future audit schedules, submit your corrective action plans and download your reports and Mark of Trust logos to promote your achievement. Plus, you can benchmark your performance using our dashboards to help with your continual improvement journey.

Should you wish to speak with BSI in relation to your certification, please contact your local BSI office – contact details available from the BSI website:

https://www.bsigroup.com/en-ID/Contact-us/

Notes

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This audit was conducted through document reviews, interviews and observation of activities. The audit method used was based on sampling the organization's activities and it was aimed to evaluate the fulfilment of the audited requirements of the relevant management system standard or other normative document and confirm the conformity and effectiveness of the management system and its continued relevance and applicability for the scope of certification.

As this audit was based on a sample of the organization's activities, the findings reported do not imply to include all issues within the system.

Regulatory compliance

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BSI requires to be informed of all relevant regulatory non-compliance or incidents that require notification to any regulatory authority. Acceptance of this report by the client signifies that all such issues have been disclosed as part of the assessment process and agreement that any such non-compliance or incidents occurring after this visit will be notified to BSI as soon as practical after the event.

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