

Assessment to standard conformity of ISO 9001:2015



Enclosure to audit report No. 3330 / 2KKH / H0

Requirement	Audit evidence and examples; Statements on implementation and evaluation
4 Context of the organization The requirements are: <input checked="" type="checkbox"/> fulfilled <input type="checkbox"/> partly fulfilled, see non-critical nonconformity No. _____ <input type="checkbox"/> not fulfilled, see critical nonconformity No. _____ ; is closed <input type="checkbox"/> yes <input type="checkbox"/> no	
4.1 Understanding the organization and its context	The company determined its external and internal issues. These are relevant to its purpose and strategic direction, affect the company's ability to achieve its intended results of the quality management system and are explained in Quality System Manual, KEK, 30.01.2019, rev.06, page 15-16 / 46 and Interested Parties-Context Form, FR.KYS.002, 12.07.2017, rev.00. The company monitors and reviews these issues once-a-year. Relevant interested parties are shown in FR.KYS.002. Samples: <u>External Issues:</u> Graduates Insurance companies <u>Internal Issues:</u> Infrastructure Academic and administration staff
4.2 Understanding the needs and the expectations of interested parties	Interested parties' needs and expectations are listed in FR.KYS. 002. Samples: <ul style="list-style-type: none"> • Infrastructure's needs and expectations are suitability and sufficiency • Graduates' needs, and expectations are cooperation with university and industry, periodical seminars. Relevant interested parties and their relevant requirements are reviewed and monitored once in a year in the management review.
4.3 Determining the scope of the quality management system	Scope of the QMS is well defined, maintained as documented information base on ISO 9001:2015 standard in manual, page 18 / 46. There is no exclusion from the QMS. The company is active on higher education.
4.4 Quality management system and its processes	QMS is established, implemented, maintained and continually improved by the organization satisfactorily and this system includes the needed processes and their interactions base on standard requirements. Processes of quality management system are determined and explained very well in Process Interaction Table, KEK-EK-B, 31.01.2019, rev.04, and this table also shows general process. Processes are explained in process flow charts and procedures, too. Samples: <ul style="list-style-type: none"> • <u>Main processes:</u> candidate relationships, project realization • <u>Management processes:</u> student council, rectorate. • <u>Supporting processes:</u> Purchasing, Quality management, HR and training.
5 Leadership The requirements are: <input checked="" type="checkbox"/> fulfilled <input type="checkbox"/> partly fulfilled, see non-critical nonconformity No. _____ <input type="checkbox"/> not fulfilled, see critical nonconformity No. _____ ; is closed <input type="checkbox"/> yes <input type="checkbox"/> no	
5.1 Leadership and commitment 5.1.1 General	General top management is responsible of the leadership of the QMS and is commitment for standard requirements. Example of the requirements of the standard responsible; taking accountability for the effectiveness of the quality management system, ensuring that the quality policy and quality objectives are established for the quality management system and are compatible with the context and strategic direction of the organization, ensuring the integration of the quality management system requirements into the organization's business processes, promoting the use of the process approach and risk-based thinking; ensuring that the resources needed for the quality management system are available, communicating

Assessment to standard conformity of ISO 9001:2015



Enclosure to audit report No. 3330 / 2KKH / H0

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<p>5.1.2 Customer focus</p> <p>5.2 Policy</p> <p>5.2.1 Establishing the quality policy</p> <p>5.2.2 Communicating the quality policy</p> <p>5.3 Organizational roles, responsibilities and authorities</p>	<p>the importance of effective quality management and of conforming , etc. All 5 clauses requirements are explained in manual, page 20-21 / 46.</p> <p>Top management is ensured statement about leadership and commitment with respect to customer focus. Customer focus training was given to staff.</p> <p>Quality policy, KEK-EK-A, 08.09.2017, rev.01, includes;</p> <ul style="list-style-type: none"> • The purpose and context of the organization and supports its strategic direction • Provides a frame work for setting quality objectives. • Includes a Commitment to satisfy applicable requirements and to continual improvement, etc. <p>Quality policy is documented, issued and distributed very well and this documents revision is following effectively with its revision date, document number and issue date.</p> <p>Policy is distributed announcement boards, internal notices and e-mail are the ways of internal communication system. Policy is announced for interested parties via web site (www.okan.edu.tr)</p> <p>Responsibilities and authorities are described in department basis job descriptions and assigned by the top management. Organization Chart, ŞM.INK.001, 10.01.2019, rev.11. Samples:</p> <ul style="list-style-type: none"> • Editorial Department Expert Assistant, GT-INK.218, 18.12.2018, rev.00 • Hiring and Organizational Improvement Manager, GT-INK.211, 14.11.2018, rev.00 <p>Quality assurance management system representative is Prof. Dr. Güner Gürsoy-Rector Assistant, appointed on 06.12.2017 for:</p> <ul style="list-style-type: none"> • reporting on the performance of the quality management system and on opportunities for improvement to top management; • ensuring the promotion of customer focus throughout the organization; • ensuring that the integrity of the quality management system is maintained when changes to the quality management system are planned and implemented. <p>Job description of Quality assurance management is checked in document:</p> <ul style="list-style-type: none"> • Quality management system representative, GT-INK.153, rev. 00
6 Planning	<p>The requirements are:</p> <p><input checked="" type="checkbox"/> fulfilled</p> <p><input type="checkbox"/> partly fulfilled, see non-critical nonconformity No. _____</p> <p><input type="checkbox"/> not fulfilled, see critical nonconformity No. _____ ; is closed <input type="checkbox"/>yes <input type="checkbox"/>no</p>
<p>6.1 Actions to address risks and opportunities</p>	<p>QMS's risks and opportunities are determined base on give assurance that the quality management system can achieve its intended result, enhance desirable effects, prevent, or reduce, undesired effects, achieve improvement effectively.</p> <p>These risks and opportunities' actions were planned and these actions were integrated and implemented to the QMS processes satisfactorily and all so their evaluation of the effectiveness was explain and planned. Relevant process was explain in Risks and Opportunities Procedure PR.KYS.004.</p> <p>Hazard Identification and Opportunities Identifications are made with Risk Analyze Table.</p> <p>Risk evaluation ; Risk= Possibility x Impact</p> <p>Impacts are;</p> <p>Very High</p>

Assessment to standard conformity of ISO 9001:2015



Enclosure to audit report No. 3330 / 2KKH / H0

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<p>6.2 Quality objectives and planning to achieve them</p>	<p>High impact Medium Impact Low impact Very Low</p> <p>Risk points are classified according to the following levels for actions; High (13-25) Medium (7-12) Low (1-6)</p> <p>Risks and opportunities are evaluated in Risk Evaluation Form FR.KYS.004 department based. Sample of risks and opportunities ; Lost of educational equipment caused by delivering them without forms → 15 points (Unacceptable) Action: educational equipment's are delivered to the persons with assigned minutes form. Not repairing the defected educational materials on time → 10 points (Significant) Action: Notification of Docents for informing the related persons for defected educational materials</p> <p>The organization's quality objectives are established based on all processes, measurable, monitored, communicated, updated as appropriate and maintained documented on PL.YGG.001, rev.03 and consider applicable requirements. Previous objectives of achievement are prepared, and current year objectives were determined based on this result. Last year objectives are analyzed effectively. Samples:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 60%;">Objective</th> <th style="width: 20%;">2018-2019 Targeted</th> <th style="width: 20%;">2018-2019 Realized</th> </tr> </thead> <tbody> <tr> <td>New program</td> <td>1 doctorate 1 bachelor's degree</td> <td>ok</td> </tr> <tr> <td>Max. student number / class</td> <td>foreign lang.: 20 bachelor's deg.: 30 doctorate: 10</td> <td>ok</td> </tr> <tr> <td>Average credit for every lecturer</td> <td>420</td> <td>573</td> </tr> <tr> <td>Increasing students' profitability of CO-OP program</td> <td>% 10</td> <td>% 70</td> </tr> <tr> <td>Increasing published conference, book etc for every lecturer</td> <td>% 20</td> <td>% 20</td> </tr> </tbody> </table>	Objective	2018-2019 Targeted	2018-2019 Realized	New program	1 doctorate 1 bachelor's degree	ok	Max. student number / class	foreign lang.: 20 bachelor's deg.: 30 doctorate: 10	ok	Average credit for every lecturer	420	573	Increasing students' profitability of CO-OP program	% 10	% 70	Increasing published conference, book etc for every lecturer	% 20	% 20
Objective	2018-2019 Targeted	2018-2019 Realized																	
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Increasing students' profitability of CO-OP program	% 10	% 70																	
Increasing published conference, book etc for every lecturer	% 20	% 20																	
<p>6.3 Planning of changes</p>	<p>When the organization determines the need for changes to the quality management system, the organization are planned of changes. The organization is considered to ISO 9001:2015 requirements. QMS changes and other changes of processes are explained in manual, page 24 / 46.</p>																		
<p>7 Support</p>	<p>The requirements are: <input type="checkbox"/> fulfilled <input checked="" type="checkbox"/> partly fulfilled, see non-critical nonconformity No. 1 / 2 <input type="checkbox"/> not fulfilled, see critical nonconformity No. ; is closed <input type="checkbox"/>yes <input type="checkbox"/>no</p>																		
<p>7.1 Resources</p> <p>7.1.1 General</p> <p>7.1.2 People</p>	<p>The organization determined and provided the resources needed for the establishment, implementation, maintenance and continual improvement of the quality management system based on at the capabilities of, and constraints on, existing internal resources, what needs to be obtained from external providers. These processes are explained in manual page 25 / 46.</p> <p>Employees of the organization which is necessary for the effective implementation of its quality management system and for the operation and control of its processes the operation were determined and provided by the management. This process is explained in Training Process flowchart, AŞ.INK.004, Administrative staff hiring process flowchart, AŞ.INK.001</p>																		

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Enclosure to audit report No. 3330 / 2KKH / H0

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<p>7.1.3 Infrastructure</p>	<p>and academic staff hiring process flowchart, AŞ.INK.002 PR-004, are implemented for training and HR activities.</p> <p>Human resource process responsible is Kağan Abitağaoğlu</p> <p>Staff individual files based on national labor law (4857) are checked for:</p> <table border="1" data-bbox="432 546 1517 768"> <thead> <tr> <th></th> <th>Head Office</th> <th>Kadıköy</th> <th>Bahçelievler</th> </tr> </thead> <tbody> <tr> <td>Name</td> <td>Müge Çimen</td> <td>Selin Aslantaş</td> <td>Kübra Aksoy</td> </tr> <tr> <td>Job</td> <td>Faculty of Dentistry Assistant Professor</td> <td>OH&S Lecturer</td> <td>Students affair officer</td> </tr> <tr> <td>Hiring Date</td> <td>16.04.2018</td> <td>09.04.2018</td> <td>01.10.2015</td> </tr> <tr> <td>Graduation</td> <td>Ph doctorate 27.06.2013,</td> <td>Bachelor's degree</td> <td>License</td> </tr> </tbody> </table> <p>Maintenance and repairing responsible is Özgür Şahin, who has 3 years of work experience and mechanical engineering graduation.</p> <p>The organization's infrastructure is determined, provided and maintained for the infrastructure necessary for the operation of its processes and to achieve conformity of products and services. Office Devices and machines maintenances and periodical controls are done by the maintenance and repairing responsible. The organization do not think any investment for the company in this year.</p> <p>Maintenance process is documented on Maintenance Procedure, PR.BIS.002, rev.04, 20.04.2018. Maintenance plan and instruction manuals are checked and found adequate.</p> <p>Annual Maintenance Plan PL.YAP.001 is used to identify the machines and their periodical maintenance activities.</p> <p>All maintenance, except air conditioning maintenance, is performed by the device / equipment manufacturer service and their reports are kept by construction work department. Samples:</p> <p><u>Tuzla Campus:</u></p> <table border="1" data-bbox="432 1440 1517 1570"> <tbody> <tr> <td>Machine Name</td> <td>Elevator</td> <td>Chimney cleaning</td> </tr> <tr> <td>Date</td> <td>15.05.2019</td> <td>02.05.2019</td> </tr> <tr> <td>Maintained By</td> <td>Etaş Asansör</td> <td>Star Baca Temizliği</td> </tr> <tr> <td>Service Form Nr</td> <td>04537</td> <td>059123</td> </tr> </tbody> </table> <table border="1" data-bbox="432 1599 1517 1762"> <tbody> <tr> <td>Machine Name</td> <td>Elevator</td> </tr> <tr> <td>Date</td> <td>31.05.2019</td> </tr> <tr> <td>Breakdown</td> <td>Connection rubber were deformed.</td> </tr> <tr> <td>Repair</td> <td>Rubbers were changed</td> </tr> <tr> <td>Repaired By</td> <td>Etaş Asansör-Service Form Nr: 00743</td> </tr> </tbody> </table> <p><u>Bahçelievler Campus:</u></p> <table border="1" data-bbox="432 1883 1517 2013"> <tbody> <tr> <td>Machine Name</td> <td>Elevator</td> <td>Generator</td> </tr> <tr> <td>Date</td> <td>25.06.2019</td> <td>02.05.2019</td> </tr> <tr> <td>Maintained By</td> <td>Etaş Asansör</td> <td>Star Baca Temizliği</td> </tr> <tr> <td>Service Form Nr</td> <td>04797</td> <td>059123</td> </tr> </tbody> </table> <table border="1" data-bbox="432 2042 1517 2072"> <tbody> <tr> <td>Machine Name</td> <td>Generator</td> </tr> </tbody> </table>		Head Office	Kadıköy	Bahçelievler	Name	Müge Çimen	Selin Aslantaş	Kübra Aksoy	Job	Faculty of Dentistry Assistant Professor	OH&S Lecturer	Students affair officer	Hiring Date	16.04.2018	09.04.2018	01.10.2015	Graduation	Ph doctorate 27.06.2013,	Bachelor's degree	License	Machine Name	Elevator	Chimney cleaning	Date	15.05.2019	02.05.2019	Maintained By	Etaş Asansör	Star Baca Temizliği	Service Form Nr	04537	059123	Machine Name	Elevator	Date	31.05.2019	Breakdown	Connection rubber were deformed.	Repair	Rubbers were changed	Repaired By	Etaş Asansör-Service Form Nr: 00743	Machine Name	Elevator	Generator	Date	25.06.2019	02.05.2019	Maintained By	Etaş Asansör	Star Baca Temizliği	Service Form Nr	04797	059123	Machine Name	Generator
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Enclosure to audit report No. 3330 / 2KKH / H0

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7.1.4 Environment for the operation of processes	Date	31.01.2019
	Breakdown	Oil leakage
	Repair	Sensor was squeezed, engine covers were isolated by applying liquid seal. Oil was added.
	Repaired By	İdea Jeneratör-Service Form Nr: 0032
	<u>Kadıköy Campus:</u>	
	Machine Name	Elevator
	Date	11.06.2019
	Maintained By	Etaş Asansör
	Service Form Nr	0497
	Machine Name	Water treatment device
	Date	29.01.2019
	Breakdown	Leakage
	Repair	Device was changed
	Repaired By	Woongjin eversky
	<u>Tuzla Campus:</u>	
Suitable lighting, ventilation is provided for the area. Company has a high-tech electronic security infrastructure. 130 fire tubes are available, they are accessible and inspected once in a year by the supplier. Latest checks are realized by AVK Servis ve Bakım Hizmetleri, on 06.11.2018, service form number: 1660-1669.		
<u>Inspection samples:</u>		
Machine	Sprink system	
Date	08.03.2019	
By	Uzman Muayene Gözetim	
Report nr	SA-19.0526	
<u>Bahçelievler Campus:</u>		
Suitable lighting, ventilation is provided for the area. Company has a high-tech electronic security infrastructure. 14 fire tubes are available, they are accessible and inspected once in a year by the supplier. Latest checks are realized by AVK Servis ve Bakım Hizmetleri, on 25.04.2018, invoice number: 595.		
Elevator's last periodical inspection was on 04.07.2018, and result is not conforming.		
<u>Kadıköy Campus:</u>		
Suitable lighting, ventilation is provided for the area. Company has a high-tech electronic security infrastructure. 53 fire tubes are available, they are accessible and inspected once in a year by the supplier. Latest checks are realized by Seçkin Ticaret, on 15.05.2019.		
Machine	Generator	
Serial Nr	21380482	
Capacity	110 kva	
Date	03.03.2019	
By	Uzman Muayene Gözetim	
Report nr	SE-19.0127	
<u>Non-critical NC 1 / 1:</u>		
<ul style="list-style-type: none"> • Kadıköy campus elevator's last periodic inspection has not been performed. 		

Assessment to standard conformity of ISO 9001:2015

Enclosure to audit report No. 3330 / 2KKH / H0

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<p>7.1.5 Monitoring and measuring resources</p>	<ul style="list-style-type: none"> • Bahçelievler Campus fire tubes' last periodic control has not been performed. • Bahçelievler campus elevators' periodic inspection result is not suitable, but the non-conformance has not been eliminated. <p>Cause: Lack of planning. Corrective action: All the corrections will be performed, and more effective planning will be made.</p> <p>Laboratory Equipment Maintenance and Calibration Procedure PR.LAB.002, rev.01, 31.05.2017, is documented.</p> <p>Measurement Equipment List LS.LAB.001, is used to trace the calibration status of the measurement and monitoring equipment. Samples:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 33%;">Equipment Name</th> <th style="width: 33%;">Plaster cutting machine</th> <th style="width: 33%;">Flask washing device</th> </tr> </thead> <tbody> <tr> <td>Serial Nr</td> <td>DHF-B02-08 / 3</td> <td>DHF-B02-01</td> </tr> <tr> <td>Date</td> <td>09.03.2019</td> <td>24.05.2019</td> </tr> <tr> <td>Calibrated By</td> <td>Optomed Kalibrasyon</td> <td>Optomed Kalibrasyon</td> </tr> <tr> <td>Cert no</td> <td>915.210</td> <td>915.203</td> </tr> <tr> <td>Department in use</td> <td>Mechanical laboratory</td> <td>Plastic and acrylic Lab</td> </tr> </tbody> </table>	Equipment Name	Plaster cutting machine	Flask washing device	Serial Nr	DHF-B02-08 / 3	DHF-B02-01	Date	09.03.2019	24.05.2019	Calibrated By	Optomed Kalibrasyon	Optomed Kalibrasyon	Cert no	915.210	915.203	Department in use	Mechanical laboratory	Plastic and acrylic Lab
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Department in use	Mechanical laboratory	Plastic and acrylic Lab																	
<p>7.1.6 Organizational knowledge</p>	<p>Organization's technical knowledge has been defined on manual, page 23 / 40. Example of this knowledge from; corrective actions suppliers' feedback, customer complaint, internal quality fails, customer feedback, etc. Knowledge of the organization which are necessary for the operation of its processes and to achieve conformity of products and services. This knowledge was maintained, protected and made available to the extent necessary. The organization was determined to how to achieve any necessary additional knowledge and required. There is not any record of knowledge from experience.</p>																		
<p>7.2 Competence</p>	<p>Staff competencies are documented in Job descriptions as education, training, experience and skills separately.</p> <p>Also, Orientation Training records are reported on Staff training card which is used also recording for all training for relevant staff.</p> <p>Annual training plan for 2018-2019 year is checked.</p> <p>Training Participation Form FR.INK.015 is used to record the training participations. The effectiveness of the trainings is evaluated with Training Evaluation Form, FR.INK.016. Samples:</p> <ul style="list-style-type: none"> • Effective Communication Methods / 19-20.04.2019 / Trainer: Ayşen Laçinel • OH&S Training / 11.04.2019 / Trainer: Irmak Ildır • OIS (Students Affair System) / 10.04.2019 / Trainer: Nihan Güneş <p>Participants:</p> <ul style="list-style-type: none"> • Banu Bayrak-Quality Specialist • Gülcan Kargın-Faculty Secretary-Tuzla • Feride Dizdar- Faculty Secretary -Tuzla • Hilal Ercan Özkan-Conservatory Secretary-Kadıköy • Merve Iraz Söyletir-Pre-Licence Secretary-Bahçelievler <p>Trainings are evaluated on FR.INK.016, checked for:</p> <ul style="list-style-type: none"> • Effective communication methods / 05-06.04.2019 / Trainer: Ayşen Laçinel. Result: 5 / 5 																		
<p>7.3. Awareness</p>	<p>Orientation training are recorded on FR.INK.015. 2 new hired staffs for Head Office since last period:</p>																		

Assessment to standard conformity of ISO 9001:2015



Enclosure to audit report No. 3330 / 2KKH / H0

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<p>7.4 Communication</p> <p>7.5. Documented information</p> <p>7.5.1 General</p> <p>7.5.2 Creating and updating</p> <p>7.5.3 Control of documented information</p>	<ul style="list-style-type: none"> • Ümit İnci, Driver, 06.05.2019. • Orientation: 06.05-20.06.2019 • By: Oğuzhan Hıdırlar, Burhanettin Demirci <p>Announcement boards, users, internal notices and e-mail are the ways of internal communication system, detailed in all separated process flow chart. last management review 07.06.2018 via e-mail, on 01.06.2018.</p> <p>Communication Table, FR.KYS.006, Rev.00, is used to control communication process.</p> <p>Quality management system manual is details general framework of management system and approved by General Manager. General elements are defined with implementations and procedure references. 2015 system was adapted to the QMS.</p> <p>Document and Quality Records Control procedure, PR.KYS.001, rev.08, 16.02.2018 is used. Document Master and Distribution List, LS.KYS.001 is used to trace the distribution. Procedures, instructions and plan lists are used to trace revision status of the documents. The company documents were update to the new standard of ISO 9001:2015. Samples:</p> <ul style="list-style-type: none"> • Document and Quality Records Control procedure, PR.KYS.001, rev.08 • Back-up Procedure, PR.BIS.014, rev.02, 13.10.2016 <p>External documents are listed and controlled on External and Legal Documents List, LS.KYS.003. Samples:</p> <ul style="list-style-type: none"> • Labor law-4857 • Personal protective equipment regulation -26361 <p>Document and Quality Records Control procedure, PR.KYS.001, rev.08, 16.02.2018, is used.</p> <p>Quality Record List, LS.KYS.02 is used to define responsibilities, retention time of the records. Samples:</p> <ul style="list-style-type: none"> • PL.İNK.001 annual training plan 1+5 years. • FR.KPG.008 seminar evaluation form 1+5 years • LS.LAB.001 measurement equipment list 1+5 years. <p>Electronic documents control, and backup system is identified in Back-up Procedure, PR.BIS.014, rev.02, 13.10.2016, as well.</p> <p>The entire system documentation including internal and external correspondence can be accessed and tracked via the EBYS (Electronic document management system)</p>
8 Operation	<p>The requirements are:</p> <p><input checked="" type="checkbox"/> fulfilled</p> <p><input type="checkbox"/> partly fulfilled, see non-critical nonconformity No.</p> <p><input type="checkbox"/> not fulfilled, see critical nonconformity No. ; is closed <input type="checkbox"/>yes <input type="checkbox"/>no</p>
<p>8.1 Operational planning and control</p> <p>8.2 Requirements for products and services</p> <p>8.2.1 Customer communication</p>	<p>Offer and quotation are reviewed by candidate relationship manager. Project plan form is prepared to launch service activity as well as defined in quality system and national regulation. Project planning and realization procedure is implemented and identified in operation process plan.</p> <p>Press and public relations, digital communication and publications procedure, PR.KIT.001, 02.05.2018, rev.03. is documented to regulate the management of the customer related processes. Computerized package program is used effectively to planning of project.</p> <p>When a new student comes, Student Affairs Responsible evaluates the application's feasibility.</p>

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Enclosure to audit report No. 3330 / 2KKH / H0

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<p>8.2.2 Determining the requirements for products and services</p>	<p>Student communication is provided via e-mail, face to face communication and CRM Software. Customer complaints are recorded and followed by CRM Software. Samples:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th></th> <th style="color: red;">Head Office</th> <th style="color: red;">Bahçelievler</th> <th style="color: red;">Kadıköy</th> </tr> </thead> <tbody> <tr> <td>Student</td> <td>Serkan Ağaç</td> <td>Özcan Duman</td> <td>Meryem Öksüz</td> </tr> <tr> <td>Date</td> <td>26.02.2019</td> <td>23.01.2019</td> <td>20.02.2019</td> </tr> <tr> <td>Complaint</td> <td>Lunch is cold</td> <td>Master's degree notes' entering wasn't completed.</td> <td>Engineering Faculty's computers are old</td> </tr> <tr> <td>Action</td> <td>Catering company warning</td> <td>Students Affair Department was warned</td> <td>New computers were purchased.</td> </tr> <tr> <td>Closing Date</td> <td>28.02.2019</td> <td>24.01.2019</td> <td>27.01.2019</td> </tr> </tbody> </table>		Head Office	Bahçelievler	Kadıköy	Student	Serkan Ağaç	Özcan Duman	Meryem Öksüz	Date	26.02.2019	23.01.2019	20.02.2019	Complaint	Lunch is cold	Master's degree notes' entering wasn't completed.	Engineering Faculty's computers are old	Action	Catering company warning	Students Affair Department was warned	New computers were purchased.	Closing Date	28.02.2019	24.01.2019	27.01.2019
	Head Office	Bahçelievler	Kadıköy																						
Student	Serkan Ağaç	Özcan Duman	Meryem Öksüz																						
Date	26.02.2019	23.01.2019	20.02.2019																						
Complaint	Lunch is cold	Master's degree notes' entering wasn't completed.	Engineering Faculty's computers are old																						
Action	Catering company warning	Students Affair Department was warned	New computers were purchased.																						
Closing Date	28.02.2019	24.01.2019	27.01.2019																						
<p>8.2.3 Review of the requirements for products and services</p>	<p>Information obtained through various channels (fairs, referrals and country surveys) and customer and dealer interviews are carried out. After these negotiations, the risk department prepares a report by conducting the necessary reviews to determine the customer limit. According to the prepared report, the customer representative and the related department manager are present for the customer and dealer</p> <p>Quotes are reviewed by the relevant customer representative and the business manager. The delivery order form is prepared to initiate production activity as defined in the quality system and national regulations. Computerized package program is used effectively for production planning.</p> <p>The sales and marketing process plan SR-02 has been documented to regulate customer-related processes.</p> <p>When a new customer order is received, the sales manager is evaluating the feasibility of the claim.</p>																								
<p>8.2.4 Changes to requirements for products and services</p>	<p>The order tracking form is used effectively for order tracking.</p> <p>They have indicated to the customers the technical information and their use in product catalogs.</p>																								
<p>8.3 Design and development of products and services</p>	<p>Services' changes are kept in student files as documented information. Customer responsible is informed to relevant staff about changing of the product requirements.</p>																								
<p>8.3.1 General</p>	<ul style="list-style-type: none"> • 8.3 clause will be audited at next period. 																								
<p>8.3.2 Design and development planning</p>																									
<p>8.3.3 Design and development inputs</p>																									
<p>8.3.4 Design and development controls</p>																									
<p>8.3.5 Design and development outputs</p>																									
<p>8.3.6</p>																									

Assessment to standard conformity of ISO 9001:2015



Enclosure to audit report No. 3330 / 2KKH / H0

Requirement	Audit evidence and examples; Statements on implementation and evaluation																								
Design and development changes 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 8.5 Production and service provision 8.5.1 Control of production and service provision 8.5.2 Identification and traceability 8.5.3 Property belonging to customers or external providers 8.5.4 Preservation 8.5.5 Post-delivery activities	<p style="text-align: center;">• 8.4 clause will be audited at next period.</p> <p>The service realization is performed according to Education and Training Procedure PR.EOG.001.</p> <p>The academically programs which are approved by the YOK (The Council of Higher Education) and the academically schedules which are prepared by the university and approved by University Senate are the main guides for service realization.</p> <p>Academically boards prepare the annual schedules according to the YOK regulation no 2547.</p> <p>All activities are recorded on the online system. Identification and traceability are provided by students' ID numbers. All the student records are Tuzla Campus' archives. Samples:</p> <table border="1" style="width: 100%; border-collapse: collapse; margin: 10px 0;"> <tr> <td>Student Name</td> <td>Zeynep Taşdemir</td> <td>Dilara İslam</td> </tr> <tr> <td>Student Nr</td> <td>140904035</td> <td>171123052</td> </tr> <tr> <td>Department</td> <td>Faculty of Health Sciences Physical Therapy Department</td> <td>Pre-License Department of Health Services</td> </tr> <tr> <td>Applying Date</td> <td>01.09.2014</td> <td>15.08.2017</td> </tr> <tr> <td>Approval Date</td> <td>01.09.2014</td> <td>15.08.2017</td> </tr> <tr> <td>Applying criteria</td> <td>University examination point High-school diploma</td> <td>University examination point High-school diploma</td> </tr> <tr> <td>Studying Period</td> <td>2014-2015 / 2018-2019</td> <td>2017-2018 / 2018 / 2019</td> </tr> <tr> <td>Graduation Date</td> <td>31.05.2019</td> <td>17.06.2019</td> </tr> </table> <p>Customer property system is identified in quality manual. Control of customer property and reporting of relevant situation is defined effectively. Customer property can be technical data, know-how</p> <p>Stock inventory is provided by using computerized package program effectively. This process owner is Menekşe Övet, who has 10 years of work experience and sociology department graduation of university.</p> <p>Archiving area is very well designated in the university. Student Folder Label, FR.OGR.001 is used effectively for student's data and graduation status.</p>	Student Name	Zeynep Taşdemir	Dilara İslam	Student Nr	140904035	171123052	Department	Faculty of Health Sciences Physical Therapy Department	Pre-License Department of Health Services	Applying Date	01.09.2014	15.08.2017	Approval Date	01.09.2014	15.08.2017	Applying criteria	University examination point High-school diploma	University examination point High-school diploma	Studying Period	2014-2015 / 2018-2019	2017-2018 / 2018 / 2019	Graduation Date	31.05.2019	17.06.2019
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Assessment to standard conformity of ISO 9001:2015



Enclosure to audit report No. 3330 / 2KKH / H0

Requirement	Audit evidence and examples; Statements on implementation and evaluation																											
<p>8.5.6 Control of changes</p> <p>8.6 Release of products and services</p>	<p>Core, sub and supporting processes are defined in Continual Improvement and Process Performance Monitoring Plan QM. Performance criteria are defined and measured for all core processes. Performance results are analyzed by statistical tools and evaluated by management during management review meetings.</p> <p>Quality Control activity is detailed in quality control procedure. Banu Bayrak is quality control responsible.</p> <p>Related Documents when registration:</p> <ul style="list-style-type: none"> • Commitment: FR.OGR.005 • Residence Document: FR.OGR.002 • Criminal Record: FR.OGR.003 • Military Service Status Declaration Form: FR.OGR.004 <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 33%;">Student Name</td> <td style="width: 33%;">Zeynep Taşdemir</td> <td style="width: 33%;">Dilara İslam</td> </tr> <tr> <td>Student Nr</td> <td>140904035</td> <td>171123052</td> </tr> <tr> <td>Department</td> <td>Faculty of Health Sciences Physical Therapy Department</td> <td>Pre-License Department of Health Services</td> </tr> <tr> <td>Applying Date</td> <td>01.09.2014</td> <td>15.08.2017</td> </tr> <tr> <td>Approval Date</td> <td>01.09.2014</td> <td>15.08.2017</td> </tr> <tr> <td>Applying criteria</td> <td>University examination point High-school diploma</td> <td>University examination point High-school diploma</td> </tr> <tr> <td>Studying Period</td> <td>2014-2015 / 2018-2019</td> <td>2017-2018 / 2018 / 2019</td> </tr> <tr> <td>Graduation Date</td> <td>31.05.2019</td> <td>17.06.2019</td> </tr> <tr> <td>Graduation Criteria</td> <td>Local and European Credit completion separately General note average 2,78 / 4 = % 71,53 Min 2,00 / 4,00 Recorded on Transcript, FR.OGR.014</td> <td>Local and European Credit completion separately General note average 2,37 / 4 = % 61,96 Min 2,00 / 4,00 Recorded on Transcript, FR.OGR.014</td> </tr> </table>	Student Name	Zeynep Taşdemir	Dilara İslam	Student Nr	140904035	171123052	Department	Faculty of Health Sciences Physical Therapy Department	Pre-License Department of Health Services	Applying Date	01.09.2014	15.08.2017	Approval Date	01.09.2014	15.08.2017	Applying criteria	University examination point High-school diploma	University examination point High-school diploma	Studying Period	2014-2015 / 2018-2019	2017-2018 / 2018 / 2019	Graduation Date	31.05.2019	17.06.2019	Graduation Criteria	Local and European Credit completion separately General note average 2,78 / 4 = % 71,53 Min 2,00 / 4,00 Recorded on Transcript, FR.OGR.014	Local and European Credit completion separately General note average 2,37 / 4 = % 61,96 Min 2,00 / 4,00 Recorded on Transcript, FR.OGR.014
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<p>8.7 Control of nonconforming outputs</p>	<p>Management of Nonconformities Procedure, PR.KYS.002, rev.01, 16.02.2018 describes the control of NC services, separation from the confirming services.</p> <p>They record to Corrective Actions Form if any deviation occurs and separate the NC services.</p> <p>No Nonconforming service has been detected and reported at last period.</p>																											
<p>9 Performance evaluation</p> <p style="margin-left: 20px;">The requirements are:</p> <p style="margin-left: 20px;"><input checked="" type="checkbox"/> fulfilled</p> <p style="margin-left: 20px;"><input type="checkbox"/> partly fulfilled, see non-critical nonconformity No.</p> <p style="margin-left: 20px;"><input type="checkbox"/> not fulfilled, see critical nonconformity No. ; is closed <input type="checkbox"/>yes <input type="checkbox"/>no</p>																												
<p>9.1 Monitoring, measurement, analysis and evaluation</p> <p>9.1.1 General</p> <p>9.1.2 Customer satisfaction</p>	<p>Implementation of measurement, collection and validation of data is effective. Measurement of performance of the organization's processes includes; capability of processes, satisfaction of customer and other interested parties.</p> <p>Core, sub and supporting processes are defined in process interaction table. Performance criteria are defined and measured for all core processes. Performance results are analyzed by statistical tools and evaluated by management during management review meetings.</p> <p>The measurement of the student satisfaction is done by applying surveys according to the Measurement and Evaluation Procedure, PR.OLD.001, 31.05.2016, Rev.01.</p>																											

Assessment to standard conformity of ISO 9001:2015



Enclosure to audit report No. 3330 / 2KKH / H0

Requirement	Audit evidence and examples; Statements on implementation and evaluation
<p>9.1.3 Analysis and evaluation</p> <p>9.2. Internal audit</p>	<p>Customer Satisfaction is made online.</p> <p>Customer satisfaction questionnaire is applied to graduate students. The survey consists of 3 sections and 33 questions. Total has been applied to 955 students. Likert type scale was used. It is average.</p> <p>Lecturer assessment questionnaire is applied to current students. A total of 66.360 questionnaires were administered using 10 questions and 5-point likert scale. The average is 4,15 / 5 (I agree + I fully agree).</p> <p>Quality management representative Prof. Dr. Güner Gürsoy-Rector Assistant is responsible for data analysis activities. Sampled topics:</p> <ul style="list-style-type: none"> • Customer satisfaction • Quality objectives • NCP • CA • Risk and opportunities analyses • Internal and external expectations • Trainings • Customer demands / complaints • Employee suggestions • Supplier performance evaluation <p>Planning, conducting and reporting results of the internal audit are provided and the respective records are retained. Internal Audits Procedure, PR.ICD.001, Rev.02, 08.02.2018 is established and implemented. It is appropriately maintained and contains:</p> <ul style="list-style-type: none"> • The responsibilities and requirements for planning and conducting audits, reporting of results and retaining associated records; • The determination of audit criteria, scope, frequency and methods <p>Internal audit plan PL.ICD.001 covers all departments and environmental processes of the company. Internal audit questionnaire LS.ICD.001 is prepared and covers all clauses of ISO 9001:2015. Internal audit results are recorded on Internal Audit Report, RP.ICD.001.</p> <p>Some of trained internal auditors are: Banu Bayrak, Elif Ovaz Demir and Serap Evcil. Impartial auditors are selected.</p> <p>Last internal audit was held on 06-22.05.2019.</p> <p><u>Tuzla Campus:</u> Last internal audit was held on 06-13.05.2019. 20 departments are audited, and 16 non-conformances are detected.</p> <p><u>Mecidiyeköy Campus:</u> Last internal audit was held on 20.05.2019. 5 departments are audited, and 0 non-conformance is detected.</p> <p><u>Bahçelievler Campus:</u> Last internal audit was held on 22.05.2019. 4 departments are audited, and 0 non-conformance is detected.</p> <p><u>Kadıköy Campus:</u> Last internal audit was held on 19.04.2018. 4 departments are audited, and 0 non-conformance is detected.</p> <p>Non-critical NC 2 / 2: Kadıköy campus' internal audit records were not seen. Cause: Workload. Corrective Action: Related campus' internal audit will be performed and responsible will be notified about the non-conformance.</p>

Assessment to standard conformity of ISO 9001:2015



Enclosure to audit report No. 3330 / 2KKH / H0

Requirement	Audit evidence and examples; Statements on implementation and evaluation																												
9.3. Management review 9.3.1 General 9.3.2 Management review inputs 9.3.3 Management review outputs	<p>Management review procedure PR.OKN.001, rev. 04, 29.01.2018 is documented and implemented for realization of management review meetings.</p> <p>Inputs (internal audit results, customer feedbacks, corrective actions, performance evaluation results, improvement suggestions etc.) met the standard and documented in management review meeting agenda with 4 participants. Samples:</p> <ul style="list-style-type: none"> • Internal audit results • Previous meeting decisions • Student survey results • External suppliers' performances, etc. <p>Outputs (resources needed, product and system improvement decisions) met the requirement. Meeting report, FR.OKN.001, rev.00 is checked for evidence and decisions of meeting. Last management review meeting was held on 12.06.2019. Samples:</p> <ul style="list-style-type: none"> • Near miss forms use will be applied • Purchasing regulation will be revised 																												
10 Improvement	The requirements are: <input checked="" type="checkbox"/> fulfilled <input type="checkbox"/> partly fulfilled, see non-critical nonconformity No. _____ <input type="checkbox"/> not fulfilled, see critical nonconformity No. _____ ; is closed <input type="checkbox"/> yes <input type="checkbox"/> no																												
10.1 General 10.2 Nonconformity and corrective action 10.3 Continual improvement	<p>Corrective actions and improvement procedure, PR.KYS.003, Rev.04, 16.01.2018, is available for regulation of corrective actions. Actions implemented after internal & external audit non-conformances, etc. are recorded on Corrective Actions Form, FR.KYS.001 and followed with Corrective Actions Follow-up Form, LS.KYS.006. Due dates, relevant departments, actions and results are seen on it.</p> <p>Totally 32 corrective actions (31 from Tuzla, 1 from bahçelievler, 0 from Kadıköy) were initiated and closed at last period from general process and customer complaints. Corrective actions are performed just for NC. Samples:</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th></th> <th style="color: red;">Head Office</th> <th style="color: red;">Head Office</th> <th style="color: red;">Bahçelievler</th> </tr> </thead> <tbody> <tr> <td>Action Nr</td> <td>2019-09</td> <td>2019-ŞK-01</td> <td>2019-ŞK-05</td> </tr> <tr> <td>From</td> <td>Internal audit</td> <td>Control</td> <td>Student complaint</td> </tr> <tr> <td>Opening Date</td> <td>13.05.2019</td> <td>10.01.2019</td> <td>23.01.2019</td> </tr> <tr> <td>NC</td> <td>Purchasing Order Form FR.MAI.012, is not used.</td> <td>Archive department's cipher device is broken.</td> <td>Master's degree notes' entering wasn't completed</td> </tr> <tr> <td>Action</td> <td>Staff was warned about the related form's use.</td> <td>Device was repaired, and archive department is always locked.</td> <td>Students Affair Department was warned</td> </tr> <tr> <td>Closing Date</td> <td>31.05.2019</td> <td>12.01.2019</td> <td>30.01.2019</td> </tr> </tbody> </table> <p>Management reviews, objectives, internal audits, corrective and preventive actions demonstrate the continual improvement.</p>		Head Office	Head Office	Bahçelievler	Action Nr	2019-09	2019-ŞK-01	2019-ŞK-05	From	Internal audit	Control	Student complaint	Opening Date	13.05.2019	10.01.2019	23.01.2019	NC	Purchasing Order Form FR.MAI.012, is not used.	Archive department's cipher device is broken.	Master's degree notes' entering wasn't completed	Action	Staff was warned about the related form's use.	Device was repaired, and archive department is always locked.	Students Affair Department was warned	Closing Date	31.05.2019	12.01.2019	30.01.2019
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Date

Technical expert

Date

Duran

Lead Auditor