JACOB
PROFICIENCY

INTERNAL AUDIT REPORT

Department /Area Audited	Audit Ref. No:	JPTS-IA26-01
Quality Management System and Technical Operations (ISO/IEC 17043 / ISO 9001:2015)	Date of Audit:	12-14 January 2026
Scope of Audit	Reference Procedure:	
Compliance with requirements of the Proficiency Testing Provider management system and technical operations (Clauses 4.0-8.0).	ISO/IEC 17043 / ISO 9001:2015 Applicable JPTS management system and technical procedures	

No. of NCR	Major	Minor	Observation
2	0	2	0

Summary:

This internal audit report was prepared against Audit Plan JPTS-IA26-01 for Jacob Proficiency Testing Provider Services - Sole Proprietorship LLC. The audit covered the management system and technical operations identified in the approved audit plan and the completed clause-wise audit checklists.

The purpose of the audit was to assess the documented arrangements and implementation of the proficiency testing provider management system and technical processes, and to identify any nonconformities requiring corrective action.

Audit Team / Auditees:

Management system audit - Clauses 4.0, 5.0 and 8.0

- Audit dates: 12-13 January 2026
- Auditor: Shaira Mae Talisay
- Auditee: Krizna Gail Gumana Joquino

Technical operations audit - Clauses 6.0 and 7.0

- Audit dates: 13-14 January 2026
- Auditor: Krizna Gail Gumana Joquino
- Auditee: Shaira Mae Talisay

4.0 General Requirements:

Clauses covering impartiality and confidentiality were reviewed. Documentation and implementation were marked compliant in the management audit checklist.

5.0 Structural Requirements:

The structural requirements covering legal responsibility, management responsibility, definition of PT schemes, organizational structure, responsibilities, authorities and documented procedures were reviewed and marked compliant in the checklist.

8.0 Management System Requirements:

8.1 General Requirements and 8.2 Management System Documentation

The management system framework, policies, responsibilities, management system documentation and personnel access to applicable documentation were reviewed and marked compliant.

8.3 Control of Management System Documents

Document control arrangements were generally found compliant; however, one minor nonconformity was recorded against Clause 8.3.2(b). One sampled controlled document did not show evidence of the required periodic review/update. This finding is identified as MINOR NC M-01.

8.4 Control of Records

Requirements for identification, storage, protection, back-up, archiving, retrieval, retention and disposal of records were reviewed and marked compliant.

8.5 Actions to Address Risks and Opportunities

Risk and opportunity requirements were reviewed and marked compliant.

8.6 Improvement and 8.7 Corrective Actions

Improvement and corrective action requirements were reviewed and marked compliant.

8.8 Internal Audits and 8.9 Management Reviews

Internal audit and management review requirements were reviewed and marked compliant. No additional findings were recorded under these clauses.

6.0 Resource Requirements:

6.1 General

Availability of personnel, facilities, equipment, systems and support services necessary for PT activities was reviewed and marked compliant.

6.2 Personnel

Personnel competence, impartiality, authorization and communication of duties, responsibilities and authorities were reviewed. One minor nonconformity was recorded against Clause 6.2.5: one sampled personnel competence record did not contain complete documented evidence demonstrating current competence for assigned PT activities. This finding is identified as MINOR NC T-01.

6.3 Facilities and Environmental Conditions

The requirements for appropriate facilities, control and monitoring of environmental conditions, access control and separation of incompatible activities were reviewed and marked compliant.

6.4 Externally Provided Products and Services

The requirements for selection, evaluation, monitoring and control of externally provided products and services were reviewed and marked compliant.

7.0 Process Requirements:

7.1 Establishing, Contracting and Communicating the PT Scheme Objectives

Review of requests, tenders and contracts and PT scheme communication requirements were reviewed and marked compliant.

7.2 Design and Planning of a PT Scheme

Planning, statistical design and determination of assigned values were reviewed and marked compliant.

7.3 Production and Distribution of PT Items

PT item production, homogeneity and stability assessment, handling, storage, packaging, labelling, distribution and participant instructions were reviewed and marked compliant.

7.4 Evaluation and Reporting of PT Scheme Results

Data analysis, evaluation of participant performance and PT reporting requirements were reviewed and marked compliant.

7.5 Control of the PT Scheme Process

Technical records, data and information management, surveillance of processes and control of nonconforming work were reviewed and marked compliant.

7.6 Handling of Complaints and 7.7 Handling of Appeals

Complaint and appeal handling requirements were reviewed and marked compliant. No technical findings were recorded other than MINOR NC T-01 under Clause 6.2.5.

Overall Audit Conclusion:

The completed management and technical audit checklists recorded two (2) minor nonconformities, with no major nonconformities and no observations. All other sampled clauses were marked compliant for documentation and implementation.

The audit status is satisfactory subject to timely correction, root-cause analysis, implementation of corrective actions and verification of objective evidence for the two minor nonconformities.

Summary of Findings

• MINOR NC M-01 - Clause 8.3.2(b): Evidence of periodic review/update was not available for one sampled controlled document.

• MINOR NC T-01 - Clause 6.2.5: One sampled personnel competence record did not contain complete documented evidence demonstrating current competence for assigned PT activities.

The findings shall be addressed through the established corrective action process and closed after satisfactory verification of the implemented actions and supporting records.

Findings:

MINOR NC M-01 - Management, Clause 8.3.2(b): One sampled controlled document did not show evidence of the required periodic review/update.

MINOR NC T-01 - Technical, Clause 6.2.5: One sampled personnel competence record did not contain complete documented evidence demonstrating current competence for assigned PT activities.

Remarks / Recommendations:

M-01: Review the affected controlled document, complete the required periodic review/update and retain evidence of review, approval and current revision status. Review other controlled documents to confirm that the periodic review cycle is being maintained.

T-01: Complete the affected personnel competence record with the applicable evidence of education, qualification, training, technical knowledge, skills, experience, competence evaluation and authorization. Review other personnel files for completeness.

Corrective action evidence shall be submitted and verified before closure of the findings.

Follow Up Audit:	**Documents Attached:**
Yes - verification of corrective action evidence is required. Follow-up date to be scheduled.	• Audit Plan / Schedule - JPTS-IA26-01 • Filled Management Audit Checklist - F/SYS/14 • Filled Technical Audit Checklist - F/SYS/015

Auditor(s):	**Head of Audited Department / Reviewed and Approved By:**
(Name/Sign.) Shaira Mae Talisay / Krizna Gail Gumana Joquino Date: 14.01.2026	(Name/Sign.) Nerissa Mei Sarah S. Manuel - Quality Manager Date: 14.01.2026