

**MANAGEMENT SYSTEM AUDIT REPORT**  
**Executive Summary**

**Company Name:** Air Link Systems Limited  
**Legal Status:** 03413858  
**Certification Number:** 9888  
**Head Office Address:** Neo Park, Wharfdale Road  
 Birmingham  
 West Midlands  
 B11 2DF  
 United Kingdom  
 0121 765 3697  
**Telephone:**  
**Type of Audit:** Surveillance  
**Visit Number:** 1  
**Date of Audit:** 6 & 7 September 2021  
**Audit Team Leader:** Alex Misovicova  
**Audit Team Member(s):** Kirsty Wakefield  
**Standard(s) Audited:** ISO 14001: 2015, ISO 45001: 2018 SSIP  
**EAC Code(S):** 18e,28c  
**Scope of Certification:** The supply, installation, service and maintenance of air conveyance systems. The installation and refurbishment of retail checkout, dispensing and similar associated equipment, including project management and shop fitting.  
**Appropriateness of Scope:**  
**Non-applicable clauses:** Scope is considered to be appropriate

**Main client representative:** Mr Eddy Walker  
**Telephone:** 0121 765 3697  
**E-mail:** eddy.walker@alsuk.com  
**Consultant representative if used:**

**Staff FT:**  **Staff PT:**

**Start Time:**  **Finish Time:**

**Number of days onsite:**  **Number of days remote:**

**Total Hours:**

**Justification (if less than 8 hours):**

<b>Surveillance visits set at:</b>	1	<b>per year of</b>	4	<b>days per visit</b>
<b>Date(s) of next visit:</b>	8 <sup>th</sup> and 9 <sup>th</sup> September 2022 (2 days x 2 auditors)			

**NB If the next visit is a Recertification Visit additional days over and above the surveillance days may be required.**

Alcumus ISOQAR's Rules of Registration Apply See [www.alcumusgroup.com/ISOQAR](http://www.alcumusgroup.com/ISOQAR)

This report is confidential and its distribution will be limited to the audit team, client representative and Alcumus ISOQAR office



**1. Executive Summary (Non-conformance, Opportunities for Improvement, Good Practice etc)**

Remote audit due to COVID19. Evidence reviewed was received via email, Microsoft Teams screen share and interviews. The opening and closing meetings were conducted in accordance with ISO 17021:2011 Clause 9.1.9.2 with those in attendance as detailed above in below 'attendee's' section; on behalf of ISOQAR the auditor gave thanks for permitting us to provide certification services to them.

Company have demonstrated conformity to the requirements of ISO14001 and ISO45001 via the processes audited during the audit. Excellent leadership commitment with strong customer focus and enthusiasm was demonstrated by the Senior Management Team. The company's approach to its Management Systems provides an overall framework for continual improvement. A satisfactory review of management system confirmed all areas are being maintained in accordance with the requirements. Detailed supporting data and information has been established in supporting operational performance, with processes in place to ensure service delivery is compliant with requirements.

Excellent audit with no findings raised. The following opportunities for improvement were identified:

- It would be beneficial to both staff and management to conduct the annual appraisal to determine any individual training requirements.
- A formalise a root cause process on the accident form would be beneficial to support the investigations and assist with lessons learnt, further training and development requirements as preventative measures.
- The company would benefit from setting a target for number of inspections conducted by the senior management

**Continuous certification to ISO14001/45001 and SSIP scheme is recommended.  
Next audit will be on 8<sup>th</sup> and 9<sup>th</sup> September 2022.**

**2. Findings**

**Total Number of Non-conformances**      Major       Minor       N/A       X

NCR N°	Details of Non-conformances Raised	Standard/ Clause N°	Major/ Minor	Completion Date
1.				

**The organisation's representative understands the above Non-conformances and agrees to determine the root cause(s), and implement appropriate corrections/corrective actions.**

Agreed by (organisation representative)       Date

**Method of Close Out**

Corrections/Corrective Action Evidence to be sent to ISOQAR      YES       NO

Check Corrections/Corrective action taken at next visit      YES       NO

Revisit to check Corrections/Corrective Action required      YES       NO

**Note to Client: Please complete the Corrective Action Report Section of this report for any Non-conformance**

**\* PLEASE NOTE THAT THERE WILL BE AN ADDITIONAL CHARGE FOR ISOQAR TO CLOSE OUT ANY MAJOR NON-CONFORMANCES AS PER THE RULES OF REGISTRATION**

**3. Any significant Organisational Changes (also include any changes to surveillance visit patterns e.g. if additional standards have been added) and any additional information or any significant changes to the plan for stage 2 or planned arrangements (produced at stage 1)**

No organisational changes have been reported.

#### **4. Audit Conclusion**

The audit team concludes that the organisation **HAS** established and maintained its management system in conformance with the requirements of the standard(s) and demonstrated to the audit team that the management system is effective in its ability to systematically achieve the requirements for products and or services within the scope of its activities and in accordance with its policy and objectives.

The audit team concludes that the audit objectives **HAVE** been fulfilled. Based on the evidence obtained during this audit, the audit team recommends that Certification should be:

Recommended       Continued       Deferred (until satisfactory corrective action has been completed)

**Corrective Action Report – Not applicable**

**CLIENT to complete this section following Stage 2 audits, Recertification Audits and Majors Raised on surveillance only if evidence of corrective and preventive action is required to be submitted to ISOQAR see above.**

**AUDITOR to complete this section if any non-conformances are closed out prior to the end of the audit as evidence of close out.**

**COMPLETE FOR NON-CONFORMANCES RAISED IN SECTION 2 Following Stage 2 audits, Recertification Audits and Majors raised on surveillance only**

Client Name:  Certification Number:  Audit Date(s):

NCR N°	Corrective Action Taken	Root Cause	Action taken to prevent recurrence	Evidence	Accepted by
1					
2					
3					
4					
5					

This page **must** be completed and sent to ISOQAR (either via e-mail or post) along **with any relevant documentary evidence** if instructed to do so in the Executive Summary

ISOQAR e-mail Address **certdept@alcumusgroup.com**  
 Post to **FAO Cert Dept, ISOQAR Ltd. Cobra Court, 1 Blackmore Road, Stretford, Manchester M32 0QY**

Completed By (Company Representative)  Date

**Additional Information:**

**NB. Where evidence of corrective action is required to be submitted, Certificates of Registration can only be issued after the evidence supplied has been received, reviewed and accepted. Any Non-conformances not closed out within 3 months of the audit date may result in a re-audit being conducted and could also result in Certification being suspended.**

**FOR OFFICE USE ONLY WHEN EVIDENCE IS SUBMITTED TO ISOQAR**

Satisfactorily closed out? YES  NO  Reviewed By  Date

If **not** satisfactorily closed out next actions to be taken:

**NB Where Non-conformances are raised**

- For Initial Audits, Extensions to Scope and Recertification Audits; all Non-conformances must be closed out before a Certificate is authorised for issue and **can only be closed out** either by submission of evidence to ISOQAR or a re-visit to audit the corrections/corrective action **(see Non-conformance section of this report).**
- For Surveillance Audits any Non-conformance **classified as Major can also only be closed out** either by submission of evidence to ISOQAR or a re-visit to audit the corrections/corrective action **(see Non-conformance section of this report).**

**NB** All Non-conformances **must be actioned** within the agreed timescales.

**Please Note: The audit conclusion is provisional and subject to review by ISOQAR's Certification Review Team.**

## Detailed Audit Report

**The objectives of the audit:**

- To confirm that the management system conforms with the requirements of the audit standard and also any statutory, regulatory and contractual requirements that are applicable;
- To confirm that the organisation has effectively implemented the planned management system;
- To confirm that the management system is meeting its specified objectives
- The auditing is based upon a sampling process of available information
- As applicable identification of areas for potential improvement of the management system.
- To identify any non-applicable clauses under the scope of certification

**Audit scope:**

- The audit will evaluate the effectiveness of the processes identified within the visit plan and in line with the 3 year plan. The audit will be conducted at the location(s) specified within the visit plan.

## Pre- Audit Activities

### 1. Opening Meeting Attendees:

Name	Position
Eddy Walker	Global Health and Safety Manager
Steve Smith	Director
Alex Misovicova	ISOQAR Lead Auditor
Kirsty Wakefield	ISOQAR Team Member

### 2. Follow up of previous audit results – Not applicable

Have previously raised Improvement Requests/Non-Conformances been effectively closed out?      YES  NO

Has the root cause been determined and effective actions taken?      YES  NO

If **Yes** summarise the evidence seen if **No** what actions have resulted:

Nº	Previously raised IRs/NCs	Action	Closed out
1.			
2.			

### Site Walk

Virtual site walk was undertaken, see infrastructure for further evidence.

### Registration Marks

Use of Registration Marks is in accordance with the Use of Logo Rules (if used)      YES  NO  Not used

Brief details of where the UKAS Accreditation Mark and Alcumus ISOQAR Logo is used.

Use of Registration Marks on website is appropriate to the scope of certification

YES  NO  N/A

**Main Audit**

**4. Management System and Its processes (Including Interview with Senior Management to discuss context, interested parties, scope)**

**Detail and evidence:**

**Context of the organisation (KW)**

The company has been established for 25 years and they provide fit out and refurbishments services to large retail organisations. The company manage the products from start to completion which involves planning, site management, staff and suppliers and the finished products. The company is in the process of developing backwards recycling machines which allows the recycling of empty plastic and glass containers resulting in the customers receiving money off shopping bills, these which will be used within the retail sector. The company's recent projects include the removal of fresh meats and cheese counters with Tesco and replace with walls or shelving. Context of the organisation has been clearly defined, see below.

**Needs and expectations of interested parties (KW)**

The company's IMS manual describes the needs and expectation of all interested parties both internal and external. The document details the interested parties by Dependency, needs and expectations and objectives. These are reviewed during the company's management meetings – last reviewed 10 Sept 2020. The interested parties are defined as follows:

By Dependency	Needs/Expectations	Objectives
Customer/Client	Need and expect ALS to supply goods and services on time. Need and expect ALS to work to their own management systems. Need and expect ALS to be members of industry associations	Achieve revenue targets. Retain contracts. Increase repeat orders. Retain industry accreditations.
Employees	Need training. Expect clean and safe working conditions. Expect the correct tools and equipment to carry out their tasks.	Monitor and refresh training when required. Regular inspections on working conditions and equipment.
Contractors	Need training. Expect clean and safe working conditions. Expect the correct tools and equipment to carry out their tasks.	Monitor training and certification. Regular inspections on working conditions and equipment.
Suppliers (materials)	Need to meet all industry standards. Need to meet ALS and client's standards. Expect repeat orders.	Achieve cost targets. Retain contracts. Increase repeat orders. Retain industry standards.
Suppliers (utilities)	Expect continuity in supply. Need emergency plan for interruption in supply. Need to meet industry standards.	Achieve cost targets. Retain contracts. Retain industry standards.

	Needs to be inspected in regular intervals.	
<b>By Responsibility</b>	<b>Needs/Expectations</b>	<b>Objectives</b>
Share Holders / Directors	Need to monitor current and relevant legislation. Need to implement correct insurance cover across the business. Need to employ the correct balance of trained and experienced staff. Need to make funds available for relevant training. Need to monitor and implement all company policies.	Achieve revenue targets. Retain contracts. Increase repeat orders. Retain industry accreditations. Regular management review meetings.
<b>By Proximity</b>	<b>Needs/Expectations</b>	<b>Objectives</b>
Neighbouring Communities	Need a clean environment. Expect information and consultation.	Risk assess neighbouring area before work commences. Implement process and procedure as and when required. Consult and communicate with neighbours.
Neighbouring Businesses	Expect the running of their business not to be impeded in anyway.	Do not block shared access and egress.
<b>By Authority</b>	<b>Needs/Expectations</b>	<b>Objectives</b>
Local / Public Authorities	Need to be consulted when required. Expect industry standards to be met.	Consultation when required. Retain industry standards.
Government	Expects access to premises and working practices. Expects all relevant legislations to be met	Monitor and implement current legislation. Implement full management system.
Regulatory Bodies	Expect industry standards to be met.	Monitor all relevant Regulatory bodies and enrol to any accreditation schemes involved i.e. Environment Agency – WEEE, HSE, etc.
<b>By Influence</b>	<b>Needs/Expectations</b>	<b>Objectives</b>
Community Groups	Need interaction with the business.	Charity works where possible.
<b>By Representation</b>	<b>Needs/Expectations</b>	<b>Objectives</b>
Industry Membership Associations	Expect their standards and processes to be met. Expect industry standards to be met.	Monitor and implement all accreditations.

**Scope (KM)**

The Scope and the boundaries of the organisation has been confirmed during the opening meeting and remains the same as the pervious report. Certification scope has been confirmed as:

*“The supply, installation, service and maintenance of air conveyance systems. The installation and refurbishment of retail checkout, dispensing and similar associated equipment, including project management and shop fitting.”*

Applicability of clauses has been determined, the company does not undertake any design activities,

### Management Systems and its processes (KW)

The company's integrated management system dated August 2021 Version 1.01 covers the required aspects of both ISO 14001:2015 and 45001:2018 standards. PDCA approach has been implemented. The document is subject to annual reviews with next planned review August 2022. The company also have an Environmental Health and Safety policy dated 16 August 2021 version 1.9 which is approved by the MD. Manual is in shared folder and accessible to all.

### Summarise Conformity with Requirements:

A suitable level of documented information was observed to demonstrate the Company's compliance to clause 4 of the ISO14001:2015, ISO45001:2018. Requirements of SSIP scheme have been addressed.

## 5. Leadership

### Detail and evidence:

- Integrated Management System Manual. Version 1.01, August 2021
- Environmental H&S Manual, version 1.04, June 2021
- Section 5 of IMS – Leadership
- Environmental H&S Policy, 16/08/2021, version 1.9

### Business Overview including Strategy AM

The business has been trading for 25 years. Client based has been discussed, the company works for Tesco, Sainsbury's, Ikea etc. The company undertakes the role of Principal Contractor and Contractor under CDM. Managing Director has been interviewed. The company supplies to retail industry and has remained operational throughout the pandemics. Hybrid working model (remote and office) continues. COVID controls remain in place. Communication with workforce is via MT and face to face meetings. Business strategy was discussed, key areas identified as:

- Business growth
- Sustainability
- Performance

Succession planning forms a part of the strategy, pathway to success is currently being developed. Apprenticeship scheme is being considered; the organisation is working closely with Birmingham University. Business risks and opportunities were discussed. Risks identified as:

- Reliance on key people – addressed via succession planning
- COVID19
- Seasonal work – part of retails sector
- Use of suppliers – some products come from China

### Opportunities

- Branch out in different sectors
- Development of new products and solutions

The focus remains on meeting and exceeding customer requirements and on wellbeing. Discussed in monthly board meetings and communicated to workforce. Evidence of workforce involvement sampled:

- Monthly H&S meetings – attended by H&S reps and different member of workforce
- Subcontractors – under direct supervision, onboarding process in place
- H&S audits – feedback from workforce is recorded
- Wellbeing campaign – communicated via H&S alerts, posters, awareness training

### Leadership and Commitment AM

Top Management roles and responsibilities are defined and documented in section 5.1.1 of IMS. These include:



- Providing resources to ensure that the policies and IMS objectives are compatible with the strategic direction and the context of the company
- Promoting on continual improvement, a process approach, and risk-based thinking
- Supporting of relevant management roles to demonstrate leadership to their areas of responsibility
- Establish context and strategies and determine regulatory and statutory requirements
- Agree changes and implement activities to improve the IMS and its processes etc.

Evidence of commitment sampled:

- Policies
- Availability and interview with MD
- Business strategy
- Management System
- Policies
- Performance monitoring including objectives and targets, interested parties etc.
- SSOW
- Training, inductions etc.

### **Environmental and H&S Policies AM (SSIP)**

The process and purpose of policy document is outlined in section 5.2 of IMS. Environmental, Health and Safety Policy document includes:

- General statement of policy
- Organisation and responsibilities
- Arrangements
- Statements of intent

Policy statement was reviewed, the commitment includes:

- Eliminate hazards and reduce risks
- Comply with applicable HSE legislation and other requirements as a commitment to the avoidance of injury or ill health and the prevention of pollution
- Allow consultation and participation of all workers
- Assign resources to achieve targets and continually improve performance
- Communicate the requirements of IMS to all persons working for or on behalf of the organisation
- Ensure that all employees have the appropriate level of HSE awareness and training
- Promote policy along with the IMS
- Review the EHS and IMS annually to ensure its suitability and effectiveness etc.

Reviewed annually at Management Review. The statement meets the requirements of ISO14001 and ISO45001. Signed and authorised by the Director.

### **Organisational Roles and Responsibilities AM (SSIP)**

Organisational roles and responsibilities are documented within the Management System (section 5.3). H&S responsibilities are documented in Environmental and Safety Policy – part 2. Defined per role i.e. head of company, H&S manager, employees etc. The ultimate responsibility rests with Head of Company. Resources for IMS have been provided. H&S Manager appointed, qualifications include IOSH, NEBOSH, SMSTS etc. Drugs and alcohol policy in place 31/03/2021). Other documents / policies sampled:

- Driving at work policy, 26/01/2021
- EHS manual issued to all employees, includes the following:

## **1. Introduction**

## **2. Our commitment – EHS Policy, Statement of Intent**

## **3. Safety Training**

### **4. General Safety Rules**

- 4.1 Conduct
- 4.2 Drugs & Alcohol
- 4.3 First Aid
- 4.4 Reporting Injuries
- 4.5 Fire Prevention
- 4.6 Housekeeping
- 4.7 Personal Protective Equipment (PPE)
- 4.8 Equipment Operations
- 4.9 Work from Height
  - 4.9.1 Ladders
  - 4.9.2 Mobile Elevated Working Platforms (MEWPs)
  - 4.9.3 Scaffolds
- 4.10 Electrical Safety
  - 4.10.1 Isolation/Lock Off
- 4.11 Manual Handling
- 4.12 Asbestos
- 4.13 Working at Night
- 4.14 Using Display Screen Equipment (DSE)
- 4.15 Noise
- 4.16 Off-Site Safety
- 4.17 Staying Safe

### **5. Job Specific Safety Precautions**

- 5.1 Machine Safety
- 5.2 Power Saws
- 5.3 Abrasive Cut-Off Saws and Chop Saws
- 5.4 Drill Press
- 5.5 Electrical Powered Tools
- 5.6 Hand Tool Safety
- 5.7 Forklift Safety
- 5.8 Spray Painting
- 5.9 Baler Operations

### **6. Emergency Action Plan**

- 6.1 General Emergency Guidelines
- 6.2 Fire Evacuation
- 6.3 Medical Emergency
- 6.4 Workplace violence

### **7. Coronavirus COVID-19 Pandemic**

## **Arrangements for H&S AM (SSIP)**

Arrangements for H&S are documented in part 3 of Environmental and H&S policy. These include:

- Communication (consultation with employees)
- Training
- Risk assessments
- Method statements
- Co-operation with clients
- Welfare facilities
- Work equipment
- PPE
- COSHH
- First aid and accident reporting
- Accidents

- Asbestos
- Manual handling
- Fire safety and emergency procedures
- COVID19 precautions

Further evidence can be seen in EHS manual section for general safety rules, these include:

- Working at height
- MEWPS
- Ladders
- DSE
- Drugs and alcohol
- Equipment operations
- Noise
- Job specific safety precautions
- Emergency action plan etc.

Compliance is monitored in internal audits and site inspections.

#### **Accreditations AM (SSIP)**

The company holds:

- CHAS certificate expires 12/01/2022
- Safe Contractor expires 10/03/2022
- SSIP expires 12/01/2022 PC and Contractor, issued by Avetta
- Constructiononline gold expires 29/01/2022
- Acclaim Accreditation PC expires 11/12/2021

#### **Consultation and Participation of Workers AM**

Consultation is done through regular H&S meetings which involve management level as well as workers along with annual risk assessment reviews which employees partake in. Discussed with Director, see Business Overview.

The company continue to encourage effective communication internal and external and ensures the staff can participate and have an input into any or all environmental and H&S aspects of the business – regular updates and alerts are reviewed and posted and regular HSE Forums are conducted. Evidence reviewed:

- Monthly SHE forums – minutes from meeting held on 26/07/2021 were reviewed. The review includes:
  - Previous actions
  - Accidents / incidents
  - SHE audits results
  - New works
  - COVID19
  - Open Forum
  - Actions, due dates, and responsibilities are allocated and monitored.
- H&S alerts include lessons learnt, alert 55 issued July 2021 – High school fined over child's locker death seen. Briefed and communicated.
- Alerts and communications regarding COVID19 sampled and available
- Site and task specific briefings in place

Demonstrated.

#### **Summarise Conformity with Requirements:**

A suitable level of documented information was observed to demonstrate the Company's compliance to clause 5 of the ISO14001:2015, ISO45001:2018. Requirements of SSIP scheme have been addressed.

## 6. Planning for the Management System

### Detail and evidence:

- Integrated Management System Manual. Version 1.01, August 2021
- Environmental H&S Manual, version 1.04, June 2021
- Section 6 of IMS – Planning
- Risks and Opportunities, version 1, September 2020
- Aspects and Impacts Register, version 1.02, June 2021
- Legal and Other Register, version 1.4, April 2021
- Objectives and Targets, September 2020

### Risks and Opportunities AM

Actions to address risks and opportunities are defined in section 6.1 of IMS. Risks and opportunities are documented in Risks and Opportunities Register, extract from document enclosed. Monitored and reviewed at Management Review.

Potential Risk	Actions to Reduce and/or Eliminate Risk
Lack of adequate or accurate information concerning all aspects of the project delivery before commencement.	Attend scope meetings to agree scope of work to price. Procedure for raising quotations and job costings detailing all information required. Attend pre-start meetings to finalise scope of works and any additions to initial quotations.
Customer delays or fails to pay for some, or all of the work undertaken	Customer purchase order numbers are obtained prior to undertaking the work. Detailed scope of works explains all works to be completed to deliver the job.
Insufficient resource to deliver workload.	Scheduling of projects is carried out to ensure resource availability. Regular contact with sub-contractors to monitor availability.
Risks to employees, sub-contractors, client's staff and / or members of the public if work activities are not carried out safely.	Onsite safety requirements are identified and actions to reduce the risk associated with delivering the work are identified, actioned and communicated as appropriate. PPE, restricted site access, first aid arrangements etc. form the safe system of work.
Unnecessary damage to the environment due to aspects and impacts not being identified and measures to control them not being implemented.	The environmental aspects and the corresponding impacts of the company's activities are identified and measures to control them determined, including legal and regulatory compliance are implemented.
Lack of control over waste.	Waste generated is handled and disposed of in accordance with relevant legislation and site facilities. Company Waste Transfer License to be kept up to date.

Further evidence of environmental risk management can be seen in Aspects and Impacts. H&S risk management can be seen in Hazard Identification.

### Aspects and Impacts AM

The process for identification and management of environmental aspects and impacts is documented in section 6.1.2 of IMS. Aspects and Impacts Register was reviewed. The biggest environmental risks are identified as:

- Purchasing of materials
- Contamination caused from leaks and spillages

Control measures are identified and include supplier approval process, use of local suppliers, conducting of surveys to identify areas of concern, designated parking area / storage areas for plant and material storage, provision of spill kits. Compliance is monitored in internal audits and site inspections. No environmental incidents / accidents or complaints have been received. Register is reviewed annually. Life cycle has been considered, linked to relevant policies / procedures. The life cycle is addressed through the ongoing commitment and objective for zero waste to landfill during these operations.

### **Hazard Identification AM (SSIP)**

The process for hazard identification is documented in section 6.1.2 of IMS and EHS Manual. All documentation is reviewed annually.

Evidence of risk assessments sampled:

- H&S0209 Work in Public Areas
- H&S0208 Step Ladders
- H&S0513 COVID risk assessment
- H&S0280 Cable Pulling
- H&S0262 Work in Food Prep Areas
- Reviewed annually, last updated June 2021

Generic method statements sampled:

- H&S0413 MS Relocation of Express Tiles
- H&S0380i MS Installation of Main Bank Checkouts
- H&S0290 MS Installation of Key Clamp
- H&S0236 MS Decorating

Site specific SSOW sampled:

- Project no: P25679 Sainsbury's Cockermouth – RAMS for Counter removal works, 27/07/2021 includes COVID19 risk assessment. MEWP Rescue Plan – 27/07/2021

COSHH

- Available on the system
- MSDS and COSHH available and communicated
- COSHH register is maintained on site
- COSHH sampled:
  - H&S0312 White Spirit
  - H&S0339 Carpet Spray Adhesive
  - H&S0301 Loctite 270
  - Reviewed annually due June 2022

All documentation is reviewed annually. Available on shared drive and on Project (system)

### **Legal and Other Requirements AM**

The process for compliance obligation or determination of legal and other requirements is documented in section 6.1.3 of IMS. Legal requirements and evaluation of compliance are included in Management Review. Compliance is also verified in internal audits, periodic place inspections etc. Legal and Other Register was reviewed, last updated April 2021. The register includes:

- Legislation
- Applicable requirements
- Demonstration of compliance

Legislation has been referenced for the following: -

- The Health & Safety at Work Act 1974
- The Management of H&S at Work Regulations 1999
- The Health and Safety (Display Screen Equipment) Regulations 1992 (amended 2002)
- The Work at Height Regulations 2005
- The Personal Protective Equipment (PPE) Regulations 1992
- Lifting Operations and Lifting Equipment Regulations (LOLER) 1998
- Reporting of Injuries Diseases and Dangerous Occurrences Regulation (RIDDOR) 2012
- Control of Asbestos Regulations 2012
- Construction Design and Management Regulations 2015
- The Health and Safety (Safety Signs and Signals) Regulations 1996

- Safety Representative and Safety Committees Regulations 1977 and The Health and Safety (Consultation with Employees) Regulations 1996
- Control of Substances Hazardous to Health Regulations 2002 etc.

Monitored.

**Objectives and Targets AM**

Objectives and targets are set and documented in Objectives and Target document. These include:

- To identify new products to help reduce impact for plastic waste. On-going, looking into new products.
- Achieve zero to landfill – see waste management for evidence of performance. Achieved
- Reduce unnecessary travel and fuel consumption – improved due to hybrid working, monitored.
- Reduce accidents below 10 minor and 1 major – achieved in 2020

Monitored. Reviewed at Management Review.

**Summarise Conformity with Requirements:**

A suitable level of documented information was observed to demonstrate the Company’s compliance to clause 6 of the ISO14001:2015, ISO45001:2018. Requirements of SSIP scheme have been addressed.

**7. Support**

**Detail and evidence:**

**Training, Competency, and awareness. (KW) SSIP**

The company document all training and skills for their employers on the company’s skills matrix.

Training records reviewed:

Name	Training conducted	Employment
Russel Savile	Tesco Induction for property development colleagues and contractors’ courses 20.08.2020 Asbestos Awareness E-Learning Course 21.08.2020 SMSTS 28.05.2021 – Expiry 31.05.2026 Construction Skills certification Scheme – Reg No 06053546 Expiry July 2022	Contractor (direct)
Jay Papa	Construction Skills Certificate Scheme Reg No 06435915 Expires January 2024 SWQR- Location & avoidance of underground apparatus. Signing. Lighting and Guarding. no 26126294 Expires 07.05.2025 C-Tesco Induction for Tesco Development colleagues and courses – 08.10.2020	Contractor (SL Contracts)

Alex Prentice	Tesco Induction for property development colleagues and contractors' courses 03.03.2021 Construction Skills certification Scheme Reg No 13560159 Expires March 2026	Contractor (SL Contracts)
Jason Pollard	ALS SH_E internal audits 04.01.207 IOSH Working Safely 20 09.2016 PSAMA May 2021 SMSTS refresher 22.01.2019 Manual handling 09.08.2021	Regional Engineer lead
Eddy Walker	NEBOSH NGC 01.11.2016 NEBOSH Manging and controlling Hazards in construction 29.07.2016 NEBOSH Construction health and safety practical application 29.07.2016 NEBOSH National Certification in construction 01.11.2016 TECH IOSH 11.12.2016 CSCS 04.04.2018	Global Health and Safety Manager

FLT training records were sampled for:

- AF, refresher completed 26/01/2021
- AT, refresher completed 19/01/2021

All new starters are required to complete induction process. The process was sampled for:

- AW completed 23/03/2021

Inductions are role specific i.e. warehouse operative, project manager, office staff.

### Site Induction Training KW (SSIP)

All employees who work on site will undergo a full site induction which includes the following Aspects.

Tolerance on site

Site Access

Site Deliveries

Signing in and out

PPE – Specific the site

RAMS/Work permits/weekly inspections

Competency

Emergency procedures

Firefighting equipment

Fire doors and exits

Welfare facilities

Smoking policy

Radios

First aid and accident reporting

Illegal drugs and alcohol

Asbestos  
 Waste/Hazardous waste  
 House keeping  
 Covid 19

The site inductions are recorded on a Site operative induction form.

Training is reviewed during the management meetings, SH-E meetings. The company use an appraisal system to determine if individual has additional training requirements or training qualifications, they are required to complete within a 12-month period, and these are documented during the appraisal process. The company have not conducted or documented any appraisals during the Covid Pandemic. Samples of reviews seen during this visit.

Management Review dated 10 Sept 2021  
 Serial 5 Recourses

Comments - At the moment the management system is running well with the staff we have, this is down to the training the company provides and the high expectations we all set for ourselves and our teams.

**OFI 1 – It would be beneficial to both staff and management to conduct the annual appraisal to determine any individual training requirements.**

**Documentation control and records (KW)**

The company’s document control process is documented within the IMS. All documents are stored electronically on the share drive which can be accessed by all internal staff. All documents reviewed during this visit are version controlled, been subject to annual reviews and all amendments are documented.

Documents reviewed during this visit.

- Business continuity Plan September 2020 Version 1
- Environmental, Health and Safety Policy Dated 16 august 2021 Version 1.9
- Risk and opportunities Register dated Sept 2020 Version 1.0

Daily back ups in place, emergency scenarios including controls i.e., data loss are documented in Business Continuity Plan.

**Calibration AM**

CAT scanners only, dates are diarised. Evidence reviewed:

- FC Kit Fluke, certificate no: 0501492, calibrated 18/02/2021
- Genny, ZV12148GB, certificate no: RCS77014, calibrated 04/03/2021
- Kewtech electrical tester, 135126, certificate no: 0501494, calibrated 19/02/2021

Due dates are recorded on equipment register, monitored.

**Communications (KW)**

The company communicate internally with the employees by a use of teams meeting, notice boards, alert notices, and toolbox talks. The external communication is conducted by emails, telephone or use of the company’s website. External communications are detailed within the relevant job specific files and within customer feedback.

Examples of toolbox talks:

- Accident Prevention
- Accident, Near Miss and Hazard reporting
- House keeping
- Ladders
- Head protection
- Plans manage and Co-ordination.

Examples of Safety Alerts

Alert Number	Ref	Date	Title



49	H&SA0049	Jan 2021	Covid 19
50	H&SA0050	Feb 2021	Workplace Pranks
51	H&SA0050	March 2021	Discipline
52	H&SA0052	April 2021	Processes and Procedures
53	H&SA0053	May 2021	Accident/Incident Reporting
54	H&SA0054	June 2021	Discipline
55	H&SA0055	July 2021	Discipline

No adverse feedback has been received from interested parties. No visits from Regulatory or Statutory Bodies have been received.

### Business Continuity Plan (KW)

The company's Business Continuity plan is dated September 2020 and is due a review in September 2021. The plan covers the purpose, the plan activation, incident management, business continuity, recovery and resumption. The plan is currently version 1.0. The health and Safety manager is the owner of the plan and is responsible for ensuring it is maintained, exercised and updated.

### Infrastructure AM

Virtual site walk was undertaken. The premises are in business park (leased). The facilities consist of:

- Yard - car park, assembly point
  - Ground floor
    - Access controlled entrance (fobs used), sign in book, COVID19 controls, notice board – policies, insurance certs and the relevant H&S information
    - Admin office, director's office, accounts office, meeting rooms, welfare facilities and kitchen area – notice board
    - Warehouse – notice board, sign in board – fobs used, first aid station, biohazard kit, PPE signage, designated walkways, production area, storage area – racking, SWL displayed, LED lighting – motion sensitive, FLT and pallet trucks area (charging station), goods out and goods in area. Bins provided; waste is segregated. Bailer used for cardboard.
  - First floor
    - Printer room, directors' offices, office, meeting rooms, break out area, welfare facilities

High level of housekeeping has been observed. Fire exits are clearly marked and accessible. Adequate signage and lighting in place. The yard is secure, fenced off. Infrastructure is suitable for the activities undertaken.

### Summarise Conformity with Requirements and any non-applicable clauses with justification:

A suitable level of documented information was observed to demonstrate the Company's compliance to clause 7 of the ISO14001:2015, ISO45001:2018. Requirements of SSIP scheme have been addressed.

## 8. Operation

### Detail and evidence:

#### Site Visit AM (SSIP)

Virtual site visit undertaken, conducted via WhatsApp.

- Client: Tesco, Project Zip yard
- Scope: adding concession to the store
- Project no: P3297
- Duration of works: started 05/09 completion due 10/09/2021
- Subcontractor on site: SL Contracts
- Role: Principal contractor role, does not require F10
- Site Manager: Russel Saville

- Site office
  - Small area in staff canteen
- Site set up
  - Notice board, H&S poster, first aid kit, sign in book, emergency information etc.
- Welfare facilities
  - Provided by Tesco
- Asbestos
  - Report – on file, communicated. Not in are of works
- Accidents and Incidents
  - Process for reporting is included in induction
  - None reported
  - Accident book available
- Feedback
  - No issues
- Access and egress
  - Separate access (staff access)
- Communication
  - client is on based on site, daily discussions with Duty Manager
  - Duty Manager issues Permits for works
  - TBT Working at height briefed on 06/09/2021
- Permits
  - Permit issued by Tesco's on daily basis
  - Permit for working at height – internal, seen
  - Maintained and available in site folder – seen
- Plant and equipment
  - MEWP – inspected. Hired from HSS, LOLER provided.
  - Battery operated hand tools – PAT tested, labelled
  - Checked and inspected
  - Plant register – daily checks in place
- Waste management
  - General waste, skip on site
  - No waste collection
- COVID
  - Controls in place. COVID response plan – communicated, masks are worn
  - COVID19 risk assessment included in SSOW, seen
- Emergency Preparedness
  - Managed by Tesco. Emergency Plan displayed and communicated. Arrangements are displayed.
  - Sign in book in place
- Induction
  - Online Tesco induction
  - Site specific induction seen; content reviewed. HSE requirements covered.
- Site Inspections
  - Last inspected at the time of audit
  - No issues identified
  - Temporary works – daily and pre-use checks conducted, seen for 5<sup>th</sup> and 6<sup>th</sup> September
- CPP
  - H&S0460 CPP – Project Zip Yard, issued 01/09/2021 includes:
    - CDM duty holders

- Project description
- Client considerations, requirements, communications and management
- Arrangements for controlling significant site risks
- Health risks
- H&S file
- Seen and adequate, communicated / briefed
- RAMS
  - Tesco Nottingham MS Site Management
  - Tesco Nottingham – MS Vinyl Floor Cleaning
  - Tesco Nottingham MS Cleaning
  - Tesco Nottingham Installation of Re-use Wall
  - Risk assessments enclosed
  - Briefed and communicated
- Site File – standard folder structure, index included
  - Signing in Book
  - Site Induction Forms and Flip Chart and H&S Law Leaflet
  - Site Manager's Daily Site Diary and Inspection Checklist
  - PPE Register
  - Permits to Work (hot works, working at height, temporary works etc.)
  - Health and Safety Violations (red card, yellow card)
  - Tool Box Talks (one per week minimum)
  - Inspection Registers (electrical equipment, temporary works, working platforms etc.)
  - Accident Book and Near Miss Reports
  - COSHH Register
  - Asbestos Report
  - Project Directory
  - Construction Phase Plan
  - Scope of Works, Programme of Works, Drawings, PCI
  - Company Insurance
  - ALS Health and Safety Policy
  - Working Platform Tags and Plant ID Tags
  - Site Sign Offs
  - Risk Assessments and Method Statements
  - Client Specifics

Well managed site, operational controls have been fully implemented.

#### **Management of External Providers AM**

Documented process in place. Subcontractors' performance is closely monitored, under direct supervision. Approval process is documented in Master Service Agreement (version 4, December 2020). Insurance, competency records, SSOW, policies etc. are maintained. Sampled for:

- Fusion Shopfitting 24/03/2021
- SL Contracts, 01/04/2021
- Install 24, 06/01/2021

Training matrix for subcontractor's competency is maintained, training records seen. Well managed process, no concerns raised.

#### **DSE AM**

Requirements are included in inductions. Completed annually. Sampled for:

- AW, 25/03/2021

- AP, 14/05/2021
- CY, 24/01/2021

No further actions were required.

### Maintenance and Legal Compliance AM (SSIP)

The maintenance records were sampled for the following:

- Equipment Register is maintained, seen
- Compressor is inspected by Allianz, policy no: NZ27521297, inspection due: 11/06/2022, satisfactory
- Compressor maintenance / service was completed by AQ Central Ltd on 14/08/2021
- LOLER for FLT, report no: E33869018258, completed by Allianz, due 07/06/2022. Pre-use inspection completed; inspection dated 31/08/2021 was sampled. No defects reported.
- Passenger lift LOLER report no: E33869018257, due 08/12/2021. Inspected by Allianz
- Annual racking inspection completed 06/01/2021, actions identified and fully addressed, follow up seen
- Gas safety certificate dated 22/09/2021 seen
- Fire extinguishers were inspected in October 2020
- Fire alarm was last inspected on 31/08/2021
- PAT testing completed 04/01/2020
- Internal racking inspection dated 20/08/2021 was reviewed, completed weekly
- NICEIC electrical safety report was completed in 2017
- Vehicles
  - 8 leased vehicles
  - Annual licence checks are conducted
  - Vehicle checks are conducted weekly, used for reporting of defects
  - Sampled for:
    - TS20ALS – 06/09/2021, no issues
    - HW20NMU – 01/09/2021, tyres require replacing. Actioned.

### Control of Waste (KW)

**Waste carriers (KW);** The company are registered as waste carriers and also use external waste carriers to remove all their waste streams. The company generate various waste streams such as, Wood, Metal, Recycling and General waste All waste is placed into the large waste containers which are individually marked and stored in the outside of the compound. Waste bins are provided within the warehouse for the disposal of general and recycling waste. Waste skips were seen during the site walk and are appropriately managed.



The company hold their own waste licence to transfer waste from site.

Licence sampled

Name as registered	Registration number	Registered as	Registration date	Expiry Date
Air Systems Link	CBDU196867	Carrier, Broker, Dealer – Upper Tier	03.09.2020	09.09.2023

The company waste carriers are documented on the Waste carriers register dated April 2021 version 1.0, with a planned review date of April 2022

Sample of external waste contractors sampled.

Company	Registration number	Registered as	Registration date	Expiry Date
European Metal Recycling	CBDU188448	Carrier, Broker, Dealer – Upper Tier	24.08.2020	21.08.2023
ISL Ltd	CBDU47202	Carrier, Broker, Dealer – Upper Tier	04.12.2018	02.12.2021
One stop Recycling	CBU213495	Carrier, Broker, Dealer – Upper Tier	09.12.2020	08.01.2024
Smurfit Kappa UK Ltd	CBDU 59307	Carrier, Broker, Dealer – Upper Tier	26.09.2018	14.10.2021
Veolia Es Birmingham Ltd	CDBU160523	Carrier, Broker, Dealer – Upper Tier	28.02.2020	12.03.2023

The company have conducted the following waste transfers:

Carrier	Waste Type	Container Type	Jon number	Date Transferred
Veolia	Non-Hazardous waste	RORO 35YD3/26.8ms	42990	06.08.2021
European Metal recycling	Metal	Bulker (full)	1038264	13.08.2021

**Emergency Preparedness (KW)** The company’s emergency response plan is documented, dated 12 March 2021, Version 1.05, with a next review planned March 2022. The plan includes the responsibilities, emergency contacts, emergency protocols, fire, Utility failure and natural disaster. The plans include a floor plan which identity’s, fire exits, fire doors, smoking areas, fire points, alarm points, spill kits, first ais points, assembly points, flammable storage, refuelling points, storm water drains, foul drains, emergency evacuation route and pedestrian routes The company conduct either weekly or monthly checks on the alarms and lighting system, which are recorded and use external providers to conduct maintenance of fire equipment and lighting.

**Samples reviewed**

Emergency lighting compliance Certificate for verification of existing installation

Cert No 23504782

Dated 14.06.2021

Emergency lighting compliance Certificate for verification of existing installation

Cert No 23504796

Dated 14.06.2021

Samples of lighting checks conducted:

Date – 02.08.2021

Type and frequency of test- Flick test

Inspected by – AP

Remarks - OK

Fire extinguishers maintenance is conducted by an external provider on an annual basis. These checks are logged within the company’s register which contains the date, extinguisher/inspection, inspected by and remarks. Sample reviewed during this visit.

Fire Extinguisher certificate of maintenance

Company – DELTA fire systems Ltd

Date of inspection Oct 2020

Date of next Inspection Oct 2021

Engineer number 2522/SB

The company conduct fire alarm checks on a weekly basis, (Tuesdays at 14:00hrs) and these are documented. The document contains the dates of the test, time of the test, call point number, satisfactory (Y or N) name of person testing and signature.

The last recorded tests sampled

Date of tests - 31.08.2021

Time -14.00

Call point number- L1041

Satisfactory – Yes

Names- od tester CP

Waste management process was fully implemented. No hazardous waste is generated.

#### **Summarise Conformity with Requirements and any non-applicable clauses with justification:**

A suitable level of documented information was observed to demonstrate the Company's compliance to clause 8 of the ISO14001:2015, ISO45001:2018. Requirements of SSIP scheme have been addressed.

## **9. Performance Evaluation**

### **Detail and evidence:**

#### **Monitoring, measurement, analysis and performance evaluation (KW)**

The company conduct Monitoring, measurement, analysis and performance evaluation through internal auditing, sit visits, client meetings, safety meetings, management review, objective tracking, accident statistics review. Samples reviewed during this visit.

- Date – 15 January 21, 18 February 21, 24 March 21 21 April 2021, 27 May 21, 26 July 21

Meeting title – SH&E

Location – Team's meeting

Topics discussed -

- Previous minutes and actions
- Accidents/Incidents – 24th March 2021 to 21st April 2021
- SH&E Audit results for month
- New works
- COVID-19
- Company Website News and Achievements
- Open forum

#### **Management reviews (KW)**

The company's management review process is documented within the IMS, section 9.3

Example of recent management review seen.

Management review Dated 10 Sept 2020

Attendees: EW, SS, MF, CP

Agenda.

Status of actions from previous meeting

Changes to internal and external issues

Objectives

Performance

Resources

Relevant communications with interested parties

Opportunities for continual improvement

Outputs

Next planned review Sept 2021

Samples seen during this visit of the management review.

Date – 10 Sept 2021

	Comments
<b>Legal requirements</b>	There is no new legislation or changes in relevant legislation apart for the evermoving COVID legislation.
<b>Risks and opportunities</b>	COVID – an obvious risk to the business being a global pandemic. MF – furlough scheme saved the business but now everyone back and back on full throttle we need to look forward and march on. Cost is not and will not become an issue to get us through this current situation, we will provide what we need to provide to be compliant with both government guidelines and that of all our clients. SS – the hygiene regime we have in place is a good opportunity to continue even after the pandemic is over, hopefully reducing the sick leave of colleagues especially though the flu and cold season. Everyone agreed that freely available hand sanitiser should be made available after the pandemic is over

### Internal Audits (KW) SSIP

The company's internal process is documented in the IMS dated august 2021. The Health and safety manager is responsible for coordinating the company's internal audits and documenting the internal audit programme. The internal audit programmes indicate which areas to audited and it reflects when they are scheduled by means of yellow colour coding. On completion of the internal audit, the programme is colour coded to show: Green audit completed with no actions required and Amber audit completed with actions required. Audit findings are recorded on the company's internal audit document either ISO 14001 Internal audit document (7.5) or IOS 45001 internal audit document (5.2), Nonconformities are recorded on the company's non-conformance report.

Internal Audits sampled

Date	Auditor	Area	Issues or NCs raised
Jan 2021	EW	Policy	No issues raised
April 2021	EW	Documents	No issues raised
August 2021	EW	Operational Control (Waste)	1 NC Skip are provided laminated labels but not placed on individual skips.

**Site Audits (KW)** Site audits are conducted at all sites and the details are recorded on the company's Health and Safety Site Audit document. These include pictures of the sites, level deemed, Poor, Acceptable and good and a detailed comments box at the end of the reports.

Samples of site visits reviewed.

Date	Auditor	Site	Issues, comments raised
06 Sept 2021	ST	3297 Tesco	Temperature gun is missing, waiting on a replacement. There was no inspection for tools in the site files.
02 Sept 2021	ST	3286 Tesco	Temporary lights required at site.

Trend Analysis. The Health and Safety manager will discuss any trends with site managers, and these are also documented on the company's SH-E weekly meetings.

Samples of trends

SH-E meeting dated 26 July 2021

Site audit period - 27th May 2021 to 25th July 2021.

**20x Green, 4x Amber, 3x Red**

Subject Audit Trends - Main issues, = Segregation, site files missing

### Monitoring & Measurement (Accidents and incident recording, Health & Safety Stats) (KW) SSIP

The company's health and safety policy document dated August 2021 Version 1.9, defines the controls for incident investigation. The policy details that, all work-related injury, suspected injury, near-misses, and hazardous conditions must be reported to your supervisor and/or manager immediately.

Page 23 of 31



The company's process for Accident/Incident reporting

- All accidents, incidents and near misses **MUST** be reported to the site manager, supervisor or line manager, to enable investigations to take place.
- All details are to be recorded in the accident book.
- All accidents onsite must be reported to the Client and/or Principal Contractor and entered into the site accident book.
- Accidents where hospital treatment is required must be reported to the Health and Safety Manager as soon as possible.

The company follows the guidelines and requirements of RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) when dealing with any accidents or ill-health at the workplace. Any work-related injury that leads to an employee being absent from work for more than 7 days, including weekends

- fracture other than to fingers, thumbs or toes
- amputation
- dislocation of the shoulder, hip, knee or spine
- loss of sight (temporary or permanent)
- chemical or hot metal burn to the eye or any penetrating injury to the eye
- injury resulting from an electric shock or electrical burn leading to
- unconsciousness or requiring resuscitation or admittance to hospital for more than 24 hours
- any other injury: leading to hypothermia, heat-induced illness or unconsciousness; or requiring resuscitation; or requiring admittance to hospital for more than 24 hours.

The Health and Safety Manager oversees the RIDDOR requirements, reporting accidents, diseases or dangerous occurrences to the appropriate authorities. They will conduct an accident investigation to determine the root cause of the accident. The injured employee will be asked to participate in the investigation. All accidents are recorded on the company's accident log. Last reported RIDDOR was 2019. The company's accident figures and stats register details all incidents that have happen in the current year. There are 6 records with the last entry dating 1 August 2021 location Tesco Hendon.

Summary of the incidents documented:

**Accident 1:** Dated 1 August 2021, Accident with injury, time 1330 hrs. Employees was operating MEWP, which is used at height. The employee had his right arm out of the basket which became trapped between the basket and signage which was fixed to a wall. The employee sustained an injury to his arm which resulting in being taken to hospital and unable to work for three days.

**Outcome of investigation-** The investigation conducted concluded this was human error and it has been discussed with the contractor's health and safety manager (Blaze Health and Safety manger) that the employees should undergo refresher training. It was confirmed by the contractors Health and safety manager that the training was conducted 02.08.2021.

The investigation was conducted and closed on the 2 August 2021 by EW health and safety manager.

**OFI 2 – A Formalised a root cause process on the accident form would be beneficial to support the investigations and assist with lessons learnt, further training and development requirements as preventative measures.**

**Accident 2:** dated 26 May 2021, Accident with injury, time 2300hrs. Summary - An employee who was lone working at height did not use the correct equipment supplied and used a ladder to access the area that required work, which resulted in sustaining an injury to the arch of his left foot, due to the duration of works standing on a ladder.

**Outcome of the investigation –** Employee had made a breach in the company's Health and safety. Extra instruction, training and information given to the employee by their line manager, which included risk assessing, reporting of accidents/incidents, communications and other company processes.

The incident was investigated by EW and the file was closed on the 4 June 2021.

Lesson learnt from this incident was the operator's currency – He has not operated the equipment for a 12-month period. This had been discussed and it was deemed that all operators would under o re-fresher training as a preventative measure.



**Evaluation of compliance;** The company's process for compliance obligation or determination of legal and other requirements is documented in section 6.1.3 of IMS. Legal requirements and evaluation of compliance are included in Management Review. Compliance is also verified in internal audits, periodic workplace inspections and periodic review of records.

**Summarise Conformity with Requirements:**

A suitable level of documented information was observed to demonstrate the Company's compliance to clause 9 of the ISO14001:2015, ISO45001:2018. Requirements of SSIP scheme have been addressed.

## 10. Improvement

**Detail and evidence:**

**Nonconformities and Preventative and corrective action (KW)**

The company's IMS details the process for the Nonconformities and corrective actions. The process includes:

- Determine underlying OH&S deficiencies and other factors that might be causing or contributing to the occurrence of incidents.
- Identify the need for corrective action.
- Identify opportunities for preventive action
- Identify opportunities for continual improvement.
- Communicate the results of such investigations

All corrective actions are captured on a non-conformity report which details the non-conformance, actions required, completion date and verification of completion.

The company currently log these individual and the example seen was described in section 9 of this report under internal audit findings.

NCRs reviewed:

Non-conformance Report – Operational Control Waste ISO 45001:2018.

NCR - Skip are provided laminated labels but not placed on individual skips.

Action Required - Label skips with labels provided and make sure each new skip is labelled

Completion Date – 3 August 2021

Verified Completion Date – 3 August 2021

**Continual Improvements (KW)**

The company review the continues improvements through the means of management reviews, with the latest review conducted 10 Sept 2020. The following was noted during the review:

*"The management system working very well across the company both onsite and in the warehouse and office. The culture is changing within the company and is plain to see with most workers thinking health and safety first, which is a good thing. It has been agreed that there are no improvements required".*

**Summarise Conformity with Requirements:**

A suitable level of documented information was observed to demonstrate the Company's compliance to clause 10 of the ISO14001:2015, ISO45001:2018. Requirements of SSIP scheme have been addressed.

The audit methods used in these sections were interviews, observation of activities, review of hard copy documentation, review of documentation retained electronically and a review of records. The conclusion is based upon the evidence obtained during the audit. The auditor(s) used standard sampling techniques to obtain this evidence and no guarantee can be given that a different conclusion may have been reached had different samples been taken.

## Post Audit Activities

### 1. Closing Meeting Attendees:

Name	Position
Eddy Walker	Global Health and Safety Manager
Steve Smith	Director
Alex Misovicova	ISOQAR Lead Auditor
Kirsty Wakefield	ISOQAR Team Member
Craig Powell	Warehouse Manager

### ISO 45001 Requirement

Please request the organisation representative to invite the below personnel to attend the closing meeting

Role	Name	Justification for non-attendance
The management legally responsible for OH&S	Steve Smith	
Personnel responsible for monitoring employees' health	Eddy Walker	
The employees' representative(s) with responsibility for OH&S	Craig Powell	

### 2. Activities planned but not covered on this visit and require planning for the next visit.

Not applicable

### 3. Head Office/Locations/Branch Offices visited during this audit

Date	Location	Auditor(s)
6-7/09/2021	Remote audit, HO, Birmingham	AM, KW

### 4. Client/Contract Sites/Temporary Sites visited during this audit (if applicable).

Date	Location	Auditor(s)
	Remote project review conducted, site visit scheduled for next audit	AM

### 5. Locations/Branch Offices

All permanent Locations/Branch offices for which certificates are required (**Check on MS Dynamics**) are current and correctly identified

Yes:  No:

**Details of additional Locations/Branch Offices to be included in registration in addition to Head Office.**

ADDRESS

<b>SCOPE</b>	
<b>DETAILS</b>	Consider additional processes, hazards, risks and aspects specific to the site.

<b>ADDRESS</b>	
<b>SCOPE</b>	
<b>DETAILS</b>	Consider additional processes, hazards, risks and aspects specific to the site.

<b>ADDRESS</b>	
<b>SCOPE</b>	
<b>DETAILS</b>	Consider additional processes, hazards, risks and aspects specific to the site.

Rolling program of surveillance visits for multi-location/branch office operations to be detailed on 3 Year Audit Plan (complete at Stage 2)	YES/NA	
--	--------	--

**6. EXTENSION TO SCOPE (USE THIS SECTION ONLY IF NECESSARY)**

Has the wording of the scope changed YES  NO

New Scope Wording if changed:

**IF NEW LOCATION(S) ARE ADDED PLEASE COMPLETE FOLLOWING SECTION(S)**

**(Only complete the scope section if different from the Head Office Scope)**

Number of new certificates required i.e. Head Office plus Certificate for each Location:

**Address:**

**Scope:**

**7. Recertification Visits (complete only at a Recertification Visit)**

Has the review of activities **(in particular complaints against the client)** and reports covering the certification cycle revealed any issues?

YES  NO

If **yes** please provide details:

**AUDIT PLAN NEXT VISIT**

**Please note that changes to Auditors may be unavoidable due to operational requirements**

**The objectives of the audit:**

- To confirm that the management system conforms with the requirements of the audit standard and also any statutory, regulatory and contractual requirements that are applicable;
- To confirm that the organisation has effectively implemented the planned management system;
- To confirm that the management system is meeting its specified objectives

**Audit criteria:**

- Documents, procedures and policies relevant to the standard being audited will be required.

- The audit will be performed against the scope of activities agreed at the opening meeting or as agreed at stage 1 or as detailed on the Certificate.
- The audit will be conducted at the locations identified on this audit plan.

<b>Lead Auditor</b>	Alex Misovicova	<b>Additional Auditors (Expert)</b>	Adrian Marsh
<b>Standard(s)</b>	ISO14001/45001 and SSIP	<b>Type of Audit (e.g. Surveillance)</b>	Surveillance and recert planning
<b>Audit Dates</b>	8 <sup>th</sup> and 9 <sup>th</sup> September 2022	<b>Location(s)</b>	Head Office Birmingham Site Visit
<b>Audit Start Time</b>	09:00	Does Client need to confirm site visit with ISOQAR Head Office prior to next visit <b>YES/NO</b>	Yes
<b>Audit Language (if not English)</b>		Is Recertification Planning Required <b>YES/NO</b>	Yes

### Management Processes

Date	Time (or AM/PM) or N/A		Auditor
<b>Audit Day 1 – Head Office</b>			
<b>08/09/22</b>	AM/PM	Opening meeting	
		Context & Scope / Leadership – Meeting Top Management to discuss Context & Evaluation of Risk to business both internally and externally. - management system	
		Scope and Interested Parties (external and internal) – Top Management	
		Roles & Responsibilities & Authorities	
		Consultation and Participation	
		Management Commitment & Communication	
		Policies (EMS & OH&S)	
		Objectives (EMS, & OH&S)	
		Action to Address Risk and Opportunities	
		Risk assessment and method statements.	
		COSHH and MSDS	
		Fire Risk and Arrangements/Fire Risk Assessment	
		Emergency Preparation and Planning	
		Environmental Aspects	
		Environmental regulation and obligations	
<b>Audit Day 2 - Site Visit</b>			
	AM/PM	Installation Site Visit – Covering Site Induction, Local risks assessments, Paperwork/Job/RAMS, Method statements, RAs Environmental aspects, Waste disposal, CoSHH, PPE, Tools Inspection/Records and Vehicle Records, site processes, interaction with Contractors/Clients at site	<b>Adrian Marsh</b>
<b>Audit Day 3 – Head Office</b>			
<b>09/09/2022</b>	AM/PM	Business Continuity Plan	<b>Alex Misovicova</b>
		Documentation control and records	
		Training, Competency & Records	
		SSIP Checklist	
		Supplier/Sub-contractor Controls	
		Maintenance/Inspection & Calibration	
		Resources	
<b>Audit Day 4 – Head Office</b>			
	AM/PM	Sub-Contractor Controls	<b>Adrian Marsh</b>
		Waste Management and Waste Transfer Notes	
		Life Cycle Perspective and environmental consideration.	
		Management Review & Internal Audits covering EMS and OHS	
		Monitoring & Measurement (Accidents and incident recording, Health & Safety Stats)	
		H&S Drills and Simulations	

		Complaints and customer relations management.	
		Non-Conformances, Customer Complaints and Corrective Actions	
		Continual Improvement Plan	
		Report writing	

**Locations/Branch Office Visits**

Date	Time (or AM/PM)	Process/Aspects/Activities etc. to be Audited	Auditor
Day1	AM/PM	Head Office	Alex Misovicova
Day2	AM/PM	Installation Site Visit	Adrian Marsh
Day3	AM/PM	Head Office	Alex Misovicova
Day4	AM/PM	Head Office	Adrian Marsh

**NOTE TO CLIENT:** No further confirmation or reminders will be issued. Failure to honour the date arranged may result in extra charges being incurred by your company as stated in ISOQAR Rules of Registration.

**AUDIT PLAN COVERING THE 3 YEAR ASSESSMENT CYCLE**

Organisation Name

Month and Year Number of Days Standards	Visit 1	Visit 2	Visit 3
	July 2021	July 2022	July 2023
	4	4	TBC
	Surv	Surv, Re-cert Plan	Re-cert
<b>Area/Function/Process/Activity/Site Visits (temporary sites) etc.</b>	14, 45, SSIP	14, 45, SSIP	14, 45, SSIP
Opening Meeting	✓	✓	✓
Context & Scope & Needs and Expectations of Interested Parties	✓	✓	✓
Review of Environmental & H&S Management System, their processes and interactions. & Document & Record Control	✓	✓	✓
Management Review, Analysis & Evaluations, Identification and Management of Risks & Opportunities, Objectives	✓	✓	✓
Internal Audit & Non-conformance Management	✓	✓	✓
Hazard Identification/COSHH	✓	✓	✓
Legal & Regulatory Controls	✓	✓	✓
Environmental Aspects & Impacts & Life Cycle	✓	✓	✓
Planning of Resources & Management of Training, Competence & Awareness	✓	✓	✓
Customer Focus & Satisfaction	✓	✓	✓
Operational Planning & Sub-contractor controls	✓	✓	✓
Customer Communication Internal/External – Staff Consultation/Participation		✓	✓
Waste Management		✓	✓
H&S Management - Environmental Controls - Project Management Maintenance & Calibration – Emergency Preparedness & Response (EPR) Competency & Training	✓	✓	✓
Installation Site Visit – Covering Site Induction, Local risks assessments, Paperwork/Job/RAMS, Method statements, RAs Environmental aspects, Waste disposal, CoSHH, PPE, Tools Inspection/Records and Vehicle Records, site processes, interaction with Contractors/Clients at site	✓	✓	✓
SSIP Checklist	✓	✓	✓
Report writing	✓	✓	✓
Closing Meeting	✓	✓	✓
Recertification Planning		✓	
Recertification			✓

<b>Head Office/Locations/Branch Offices</b>	<b>Visit Plan</b>	Visit 1	Visit 2	Visit 3
Head Office		✓	✓	✓
Site Visit			✓	✓

Plan Produced By  Date

Plan Amended By  Date

Plan Amended By  Date