**MANAGEMENT SYSTEM AUDIT REPORT**

**Executive Summary**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | **Company Name:** | A1 Group | | **Legal Status:** | **13245837 Private Limited Company** | | **Certification Number:** | 7366 | | **Head Office Address:** | Silver Birches  Highland Avenue  Wokingham  Berkshire  RG41 4SP  United Kingdom | | **Telephone:** | 0118 989 4652 | | **Type of Audit:** | Surveillance V3 & V4 | | **Visit Number:** | 3 & 4 | | **Date of Audit:** | April 24th to 26th 2023 | | **Audit Team Leader:** | Graham Oatley | | **Audit Team Member(s):** | Marie Robbins, Andrew Payne | | **Standard(s) Audited:** | ISO 14001: 2015, ISO 45001: 2018 SSIP, ISO 9001:2015 | | **EAC Code(S):** | 24a,24b,35f,39a | | **Scope of Certification:**  **Appropriateness of Scope:**  **Non-applicable clauses:** | Provision of waste management incorporating metal recycling, vehicle de-pollution, toilet hire and wet waste removal.  Scope is considered appropriate  Clause 8.3 | | **Main client representative:** | Mr Clive Owen | | **Telephone:** | 0118 989 4652 | | **E-mail:** | clive@a1groupuk.com | | **Consultant representative if used:** |  | | | | | |  |
| **Staff FT:** | 58 | **Staff PT:** | 2 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Start Time:** | 0900  0800  0800 | **Finish Time:** | 1600  1600  1700 |
|  |  |  |  |
| **Number of days onsite:** | 3 | **Number of days remote:** | 0 |

|  |  |
| --- | --- |
| **Total Hours:** | 24 |

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Surveillance visits set at:** | 2 | **per year of** | 2 | **days per visit** |
| **Date(s) of next visit:** | **Oct 23** | | | |

**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)**

The opening and closing meetings were conducted in accordance with ISO 17021-1:2015 Clause 9.4.2 and 9.4.7 with those in attendance as detailed below in the ‘attendee’s’ section; I would like to thank all the audit participants at A1Group Ltd for their assistance and co-operation during the ISO9001 & 14001 2015 and 45001 IMS audit, this has enabled the audit to run smoothly and to schedule.

**Opportunity for Improvement.**

OFI Head Office site: Forks with keys left in temporary unattended, the organisation are recommended to conduct awareness training.

OFI Head Office site: No barriers around wastewater/oil extraction process, restricting public access. Provide suitable system of barriers to restrict potential access.

OFI: Removal of out-of-date documentation from Backroom system

OFI Loo Hire/Wet Waste Depot: Sealed bottles of environmentally unfriendly chemicals should be stored on a bund or placed in drip trays in a CoSHH locker.

OFI Review type of and number of fire extinguishers for each location.

OFI Loo Hire/Wet Waste Depot General housekeeping of all areas needs to improve.

1. **Findings**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Total Number of Non-conformances** |  | **Major** | **9** | **Minor** | **3** | **N/A** |  |

| **NCR Nº** | **Details of Non-conformances Raised** | **Standard/**  **Clause Nº** | **Major/**  **Minor** | **Completion**  **Date** |
| --- | --- | --- | --- | --- |
| **1.** | At the time of the audit the Fire Marshaller Certification had lapsed, training has been booked for recertification  Environmental emergency practise .exercise has not been conducted or documented. | ISO 45001:2018 Clause 8.2 and 7.2  ISO 14001:2015  Clause 8.2 | Minor | Next audit visit |
| **2.** | Loo Hire/Wet Waste Depot: Gas cage adjacent to AI Waste office building, close to entrance/exit. | ISO 45001:2018  Clause 8.1.2 | Major | 25/07/23 |
| **3.** | Loo Hire/Wet Waste Depot: Generators which are filled with petrol are stored in storage sheds which also contain flammable liquids and various chemicals. | ISO 45001:2018  Clause 8.1.2 | Major | 25/07/23 |
| **4.** | Hydraulic oil drums (sealed and open) not bunded. | ISO 14001:2015  Clause 8.1 | Major | 25/07/23 |
| **5** | Loo Hire/Wet Waste Depot: No spill kits located adjacent to liquid storage areas. | ISO 14001:2015  Clause 8.2 | Major | 25/07/23 |
| **6** | Racking within storage shed Loo Hire/Wet Waste Depot has not been load tested | ISO 9001:2015  Clause 7.1.3 | Major | 25/07/23 |
| **7** | Loo Hire/Wet Waste Depot No records for storage shed roller shutters being serviced/tested. | ISO 9001:2015  Clause 7.1.3 | Major | 25/07/23 |
| **8** | No ladder register in place or ladders tested and registered. All sites | ISO 45001:20918  Clause 8.1.2 | Minor | Next Audit visit |
| **9** | Loo Hire/Wet Waste Depot Walkways to separate vehicles/pedestrians are located/painted in the yard | ISO 45001:20918  Clause 8.1.2 | Major | 25/07/23 |
| **10** | Loo Hire/Wet Waste Depot All storage sheds should have fire exit/fire points signage located | ISO 45001:20918  Clause 8.1.2 | Major | 25/07/23 |
| **11** | Loo Hire/Wet Waste Depot Lifting chains/hooks/straps not recorded or tested (LOLER). | ISO 9001:2015  Clause 7.1.5 | Major | 25/07/23 |
| **12** | No trained personnel for first aid or fire warden for A1 Loo Hire, however on site there are first aiders from other A1 Group companies. | ISO 45001:2018 Clause 8.2 and 7.2 | Minor | Next audit visit |
|  |  |  |  |  |

**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) | Clive Owen | Date | 26/04/23 |

**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**

1. **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 changes to the organisation

1. **Audit Conclusion**

The audit team concludes that the organisation **HAS NOT** 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 NOT** 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**

**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  Nº | 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**](mailto:certdept@isoqar.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** |
| Clive Owen | Director |
| Sean Whittle | HR Consultant |
| Steve Clifford | JR Consultants |
| Graham Oatley | Lead Auditor |
| Marie Robbins | Witness |

1. **Follow up of previous audit results**

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. | The business needs to review their objectives for their integrated management system for 2022 (Delayed due to Covid) | Objectives have been reviewed and documented within Senior Management Meeting minutes | 26/04/23 |
|  | The business needs to conduct a management review before the next audit in October. (Delayed due to Covid) | Documented evidenced witnessed of meeting conducted on the 14/03/23 | 26/04/23 |

**Site Walk**

**Head Office Site Wokingham**

The company’s HO are situated in Wokingham, the site consists of large area dedicated to the recycling activities of various commodities. The site is dived into controlled areas depending on the activities being undertaken. These are controlled to restrict the access of non-authorised personnel. The main company office is located on the site adjacent to the main entrance. The weighbridge is located next to the main office. The office is a 2-floor modernised building which is dived into various areas for the operation of the company. The first floor has a controlled reception area which leads onto various offices. There are welfare facilities located on the ground floor and an open plan office area used for by a number of teams for the operation of the company. The First-floor house meeting rooms and more office space. The environment is adequate for the operation of the organisation.

The employee Welfare facility is located across from the Main office and houses the welfare and changing facilities for the workforce, the building is a portacabin and is looking a bit well used. There is a plan to modernise this facility by the organisation.

Around the secured site (by a metal anti intrusion fence) are plenty of signage and control measures. With emergency preparedness equipment located in prominent and relevant locations. There is suitable lighting for work in poor environmental conditions and separated walkways. Water course situated outside of business premises, permit to discharge held, water outlet sealed and locked.

The following observations were made: (See OFI’s)

Forks with keys left in unattended.

No barriers around wastewater process to restrict public access.

**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.

|  |
| --- |
| Company Website |

Use of Registration Marks on website is appropriate to the scope of certification YES NO N/A

**Main Audit**

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

**Detail and evidence:**

**Understanding the Context**

The organisation has determined external and internal issues that are relevant to its purpose and its strategic direction and that affect its ability to achieve the intended result(s) of its management system. The organisation monitors and reviews information about these external and internal issues. This was evidenced by:

IMS Manual no SM1 issue 3 dated March 2020. The context of the group is as follows:

Since its establishment over 15 years ago, the A1 Group has experienced significant growth. A1 Group has achieved an unrivalled level of commitment and resource to meet client demands in wet waste disposal, metal recycling, car spares, and loo hire because of this growth.

**Expectations of Workers and Interested Parties**

The organisation has determined the interested parties that are relevant to the management system, including the requirements of these interested parties that are relevant to the management system. The organisation monitors and reviews information about these interested parties. This was evidenced by:

IMS Manual no SM1 issue 3 dated March 2020.

* The following are documented as interested parties:
* Government Bodies HMRC, VAT,PAYE etc
* Enforcement authorities, such as the HSE, EA, Animal and Plant Health Agency, Traffic Commissioner etc. Compliance to health and safety requirements is mandatory
* The Public
* Memberships, accreditation, certifications and trade organisations, Construction Line, NOEA, BVSF, Freight Transport Association, P SE, RISQS, Achilles, ISO, MUDA and FORS.
* Suppliers and Service Providers
* Customers
* Employees and families

**Scope of the management system**

The organisation has determined and documented the scope of the management system. The scope provides justification for any requirement of the International Standard that the organisation has determined is not applicable. The scope is suitable for the organisation and has been determined as:

*Provision of waste management incorporating metal recycling, vehicle de-pollution, toilet hire and wet waste removal.*

The company does not conduct any design services, so Clause 8.3 is exempt.

**Quality management system and its processes**

The organisation has established, implemented, maintained, and continually improve a management system, including the processes needed and their interactions, in accordance with the requirements of the standards held by the business. The organisation has determined the processes needed for the management system and their application throughout the organisation. This was evidenced by:

The organisation have a documented evidence detailing in the form of a flow chart the process procedure on page 5 of the IMS manual SM1 issue 3 dated March 20.

The following were observed during the audit:

* OP 1 Risk Assessments and Method Statements
* OP 2 Environmental Aspect Assessment
* OP 3 Compliance Obligations
* OP 4 Training and Competency
* OP 5 Communication and Consultation
* OP 6 Document Control
* OP 7 Waste Management and the environment
* OP 8 COSHH
* OP 9 Accident, Incident, and near miss reporting
* OP10 Calibration and Maintenance
* OP11 Monitoring and Measurement
* OP12 Control of non-conformances
* OP13 Customer complaints and feedback

**Summarise Conformity with Requirements:**

Evidence reviewed has demonstrated that the requirements of clause 4 have been met. The organisation continues to monitor and review its context and the needs and expectations of interested parties.

1. **Leadership**

**Detail and evidence:**

**Leadership and Commitment**

Leadership and commitment were evidenced during the audit. Top management take ultimate accountability for the management system, ensuring they engage, direct and support. The management system adopts a process approached and risk-based thinking.

The management team provide leadership to create and maintain a culture within the organisation which encourages the fulfilment of the objectives. They have responsibility for ensuring that the policies are understood, implemented, and complied with. All personnel are responsible for ensuring that each part of the management system relevant to them, is operated in accordance with specified requirements.

A Top management interview was conducted. The top management discussed the following areas:

Overview of the business including business Processes and any changes

Resources including any changes

Objectives/KPI’s and achieving the intended results

Improvements

It was evident from the discussions held that top management are actively involved and committed to the Management System. Details of the discussion is as follows.

As part of the evaluation for Leadership & Commitment I spoke to Clive Owen who is the Director and is accountable for the overall effectiveness of the IMS. On speaking with CD regarding the business scope it was evident that there was a good/ understanding of the business scope and its overall Context.

I asked CO about the business approach to risk based thinking for the requirements of the IMS, CO provided a good understanding of the current business risks and how they were addressed within the business Objectives.

On speaking to CO regarding the importance of resources and the planning to ensure effective resources are available within the IMS, COP provided a good understanding of the current business resource needs and how they are implemented across the business.

I spoke to CO about good communications from top management and the commitment to ensuring that the IMS is effectively communicated, CO provided a good understanding of the current communications process, internally and externally within the business IMS, including how these are communicated.

I asked CO to explain how the IMS is monitored to ensure that its intended results are met; CO provided a good understanding of the current business processes that monitor, and measure expected IMS outputs.

On speaking to CO regarding the importance of top management involvement; I asked how CO engaged with the IMS and promoted its importance to the business and its staff; CO provided a good understanding of how the current supporting process was achieved.

I asked CO how he has promoted IMS improvements; CO provided a good understanding of how the current improvements were achieved and how they were monitored.

**Customer Focus**

The organisation focuses on enhancing customer satisfaction by ensuring that customer requirements have been determined, understood and are being continually met. This includes ensuring risks and opportunities that can affect conformity are determined and addressed. This was evidenced by:

During the interview with CO it was evident that the organisation have orientated their strategy to ensure that customer focus is paramount. This is evidence within the management meeting minutes dated 21/06/22. Customer and client feedback is documented and analysed to ensure the correct action is undertaking if issues arise.

The process for Customer complaints and feedback is documented within Op013 and Op 012 Non- Conformance, Corrective and Preventative Actions.

**Establishing and Communicating the Policies**

The organisation has established, implemented, and maintains policies appropriate to the standards held by the business. This was evidenced by:

All organisation documentation is stored on the Back Office Solution application. On review of the documentation it was evidenced:

OH&S policy seen signed and dated 01/01/23 by RP

Environmental Policy signed and dated 01/01/23 by RP

Quality Policy signed and dated 01/01/23 by RP

These policies are located within company Welfare facilities and within the online system.

Health and Safety Policy Statement dated 01/01/23 review Jan 24 signed by CO

**Organisational Roles and Responsibilities**

The organisation has assigned, communicated, and ensured understanding of roles and responsibilities relating to the management system. Top management has assigned responsibility and authorities as required by the standards held by the business. This was evidenced by:

The organisation on review document the Roles and Responsibilities in a form of a Group Structure Chart Version 9.0 dated 17/01/22, this is located within the online system Back Room solutions.

Roles and responsibilities are also documented within the Business Risk Register dated 01/01/23 in relation risks that may affect the company.

**Consultation and Participation of Workers**

The organisation has established, implemented, and maintained a process for consultation and participation of workers at all applicable levels and functions, and, where they exist, workers’ representatives, in the development, planning, implementation, performance evaluation and actions for improvement of the OH&S management system. This was evidenced by:

The organisation hold a monthly OH&s meeting to review any incident, accidents, near misses and aspects that may have occurred or within the group’s activities. The last meeting was conducted on the 14/03/23 with all management groups present. As discussed, the organisation has an open-door policy with the reporting of any aspects that may have had an affect or could have an effect on the company’s activities or outcomes.

Regular Toolbox talks and training are conducted by the external consultant support.

**Summarise Conformity with Requirements:**

The organisation has met the requirement of clause 5. Top Management had well documented information regarding business objectives, Q/H/E objectives. The MD had appointed roles to help support the IMS

1. **Planning for the Management System**

**Detail and evidence:**

**Actions to address risks and opportunities**

The organisation has considered the context of the organisation to determine the risks and opportunities to be addressed and appropriate actions taken. This was evidenced by:

As documented within the organisation Business Risk Register dated 01/01/23 revised March 23. The following risks are reviewed This is detailed as the following:

* + - Metal Recycling
    - Car Spares
    - Loo Hire
    - Wet Waste
    - Transport
    - Financial (including Suppliers)
    - Resources
    - Training
    - H&S
    - Environmental

The risk table is detailed as a Traffic light system detailing the level of risk categorized as Low, medium, and High. The following are examples of risks documented:

Service Risk

Example 1

Fire at Depot (Medium) The A1 Group have Fire Marshals and Firefighting equipment at all depots in order to deal with a possible fire. They have five depots which can all cover each other if necessary and one depot becomes un useable. The H&S committee and H&S Reps discuss Fire Prevention on at its monthly meeting and an annual Fire Risk Assessment in conducted by external supplier.

Example 2.

Lack of Business Continuity Plan. (Medium) The A1 Group have a business continuity plan and part of this is the Group have 5 operational sites in 5 locations and all are within an hour of each other, and employees could, if necessary, transfer to another site if required. The IT server is stored off site and backed up daily.

The business continuity plan is reviewed annually by the various Divisional Managers and external suppliers i.e. IT / H&S and HR.

Example 3

Metal Recycling (Low) Changes in legislation The A1 Group work with various external bodies to ensure its fully compliant with legislation and where changes are due then corrective measures are implemented well in advance to ensure fully legally compliant at all times.

The General Manager will in conjunction with the HR Consultant, H&S Advisor, ISO Advisor, various external bodies and both the Divisional Manager and Transport Manager review all legislation changes.

**Hazard identification and Risk assessments**

The organisation have established a process through which hazard identification can be carried out within the business. This is carried out in an ongoing and proactive manner in order to ensure hazards are controlled and mitigated. This process takes into consideration the relevant routine and non-routine activities, past incidents which are relevant, potential emergency situations, and people. This was evidenced by:

On review of OP 0001 Risk Assessments and Method Statements issue 2 the following have been considered by the Group:

Both routine and non-routine activities

Activities of all personnel having access to the workplace including sub-contractors and visitors,

Facilities at the workplace, whether provided by the organisation or others.

Human behaviour, capabilities, and other human factors

Identified hazards originating outside the workplace capable and adversely affecting the health and safety of persons under the control of the organisation within the workplace.

Hazards created in the vicinity of the workplace by work-related activities under the control of the organisation

Infrastructure, equipment, and materials for the workplace, whether provided by the organisation or others.

Changes or proposed changes in the organisation, its activities, or materials.

Modifications to the health & safety management system, including temporary changes, and their impacts on operations, processes, and activities.

Any applicable legal obligations relating to risk assessment and implementation of necessary controls.

The design of work areas, processes, installations, machinery/equipment, operating procedures, and work organisation, including their adaptation to human capabilities.

The Group also document the process within a Flow Chart detailing the requirements to conduct the RA.

The following Risk assessments were observed during the audit:

* Fire Alarm report serial no 22067150/4486 dated 17/09/20 conducted by Berridge Electrical Services.
* Fire RA Wokingham Main site dated 08/11/22 conducted by SW FCIPD
* Fire RA Loo Hire Bennetts yard dated07/11/22 conducted by SW FCIPD
* Fire Prevention Plan dated 01/01/23 version 5.3
* Fire Emergency Evacuation Plan and the Fire Procedure dated July 18 version 1.0 revised 01/01/23.
* The following RA were observed during the audit:
* RA Abrasive Wheels dated 01/01/23 version 1.0 conducted by SW
* RA Climbing Ladders dated 01/01/23 1.0 Conducted SW
* RA Scrap Yard and Spares dated 01/01/23 Conducted by SW

**Environmental Aspects and Impacts**

The organisation has considered the aspects and impacts associated to its operations and activities. They have identified any normal, abnormal, and foreseeable emergency situations that may relate to these any significant impacts are communicated throughout the business. Where applicable the organisation have considered the whole lifecycle perspective of these items. This was evidenced by:

On review of the Aspect Assessment 01/06/2022 it was evidenced that the organisation has considered the aspects that could affect the Group. The following are examples of aspects and their control measures:

Printers Cartridges: Overall score 16 Control Printer cartridges are removed for safe disposal.

Electrical Equipment: Overall Score 16 Control Electrical Equipment is disposed of as required by a recognised provider.

Tires: Overall Score 60 Control Tires are removed from use - with tires that are re-usable these are sold on to the general public through the tire shed.

The group have undergone a Noise Management Plan to comply with the requirements of the site permit 83313. This assessed the whole site during hours of work on areas which produce the most noise.

**Legal Compliance**

The organisation has established, implemented, and maintained a process to determine applicable legislation to the business, including how they apply to the business and what needs to be communicated. They have ensured that they have access to up to date legal and other requirements. This was evidenced by:

|  |  |  |  |
| --- | --- | --- | --- |
| **Legislation** | **Regulator** | **Comments / means of compliance** | **Method / Record maintained to ensure legal compliance** |
| Environmental Protection Act 1990 -Part 2 | Environment Agency | Requirement to dispose of waste through proper duty of care | Waste Transfer Notes  Obtainment of Waste Management / Carrier Licenses and Environmental Permits |
| Environmental Protection Act 1990 -Part 3 | Environment Agency | Requirement for clarifying statutory nuisance e.g., noise and odors from our premises | Internal audit checks |
| List of Waste Regulations 2005  (As amended 2015) | Environment Agency | Clarification of wastes being collected and disposed using the European Waste Catalogue | EWC Codes on the waste transfer / consignment notes |
| Hazardous Waste Regulations 2005  (amendments 2016) | Environment Agency | Hazardous Waste will be dealt with accordingly and appropriately with waste consignment notes maintained. | Waste Consignment Notes |

This is reviewed at Senior Management meetings.

**Objectives and Planning to achieve them**

The organisation has established objectives relevant to the business at relevant functions and levels. These are consistent with company policies and are measurable, monitored, communicated, and updated as appropriate. Documented information is maintained on the objectives. This was evidenced by:

The objectives are reviewed during Management Meetings, the last set of objectives were reviewed during meeting dated 21/06/22.

The company objectives for 2023 are as follows set on 14/03/23:

* To not repeat this last ¼ financially. We need to focus and aim to manage the Winter Staffing levels and boosting the jobs and contracts going on in the wintertime.
* Drivers should all be performing to the same standards and be able to service (routes permitting) roughly the same number of toilets as every other depots. More communication is needed via each depot.

**Planning of Change**

The organisation has ensured that when they determine the need for changes, the changes are carried out in a planned manner. The organisation has considered the purpose for the change, their potential consequences, the integrity of the management system, availability of resource and the allocation/reallocation of responsibilities and authorities. This was evidenced by:

The company review planned changes and document within management meeting minutes. This covers OH&S and business aspects. The following changes are documented:

The H&S committee continues to drive and remains positive. A toolbox talk program remains in place with these being completed and placed on BO.

The provision of IOSH training to managers is hoped to drive health and safety even further.

Staffing levels between October and May need to be decreased. Need to go and look back at temporary and seasonal contracts for staff so we can manage the jobs and routes that the drivers are taking, work with the minimum number of staff in the winter, without creating problems in the summer for us.

Look at renting out spaces that we don’t need, Coventry site to look at renting out a workshop. Look at a new business model there whether it will be worth it.

**Summarise Conformity with Requirements:**

The organisation has met the requirement of clause 6. Risk is well documented, and the organisation has identified what compliance obligations they need to comply to.

1. **Support**

**Detail and evidence:**

**Resources**

**Main operating site**

Resource requirements are discussed at Management Review and during the site walk the work environment and equipment provided was seen to be adequate in all areas for the tasks being performed. No unaddressed health, safety or environmental hazards were evident.

Main Site maintenance is the responsibility of the of the organisation.

**Infrastructure Office/Yard**

The main office has adequate facilities within the main office with eatable heating and lighting to allow the operation of the organisation. The following was observed:

* PAT was conducted on in 06/05/22
* Fire extinguishers serviced by RES Fire Protection Engineers Fire dated 2/23
* Aircon was serviced on the 23/05/22
* Fixed wiring certificate no 0745 dated 11/09/20 NICEIC number 012082 Berridge Electrical Services expiry 10/09/23.
* Racking inspection report for car storage in Spares department dated 31/08/22 Doc number 4542 conducted by Swansea Commercial Body Builders Ltd.

**Competence:**

A1 Group has a detailed and well-up-to-date training matrix. The information contained in the table below is a sample of the information detailed in the SAGE online system. This has undergone a major update due to the loss of records because of the system hack.

The company keeps records on the license/qualifications held by employees, recorded in the training matrix within the SAGE system. Original certificates and copies of licenses are held in hard copy on file. The following were observed during the audit

|  |  |  |  |
| --- | --- | --- | --- |
| Employee | Training/license | Date | Remarks |
| AB | Materials Re-handler 360 0 ACTIVE  Fire Marshall | 07/01/2025  02/04/2022 | OOD |
| JS | Industrial Counterbalance Forklift 0 ACTIVE  Level 3 - First Aid at Work | 24/11/2023  25/05/2024 |  |
| PR | Materials Re-handler 360 | 07/01/2025 |  |

**Staff awareness of roles and responsibilities:**

The Roles and Responsibilities for all positions, are defined within Back Office System , these are briefed to all staff upon recruitment and are included within the individual’s job description. New employees are shown an induction video on starting, this repeated yearly. The following induction records were evidenced:

* JS – started 10.06.2019
* JN - started 22.09.2020
* PR- started 27.10.2014
* AB –started 15.10.2004

**Documented information**

The organisation has a document control register in place listing all documents which are used within organisation. All documents are reviewed at MRM and it’s the responsibility of the document owners and the external consultant to review the documents. An external back up of electronically stored documents onto the server is taken daily. This is done via remote connection with no back-ups stored on the site. All Training and Personal information is documented on the SAGE system. The Procedure for the control of documented information is OP 006 Control of Documents and Data Storage issue 3

**Communication**

The Company ensures effective communication between various levels and functions by means of staff inductions, periodic training, and direct contact to ensure the process of the management systems are met and are effective. External communication with customers/suppliers is ongoing through phone calls, emails and when required visits to customer sites. Externally communicate information relevant to the HSEQ and Business Continuity is done as per compliance obligation or concerns of interested parties. Such channels of communication are established for communicating to the government authority as well as to submit various obligation reports to the external interested parties as per compliance obligations. Decisions shall be made by a Director on what external communication shall be required in the event of a Business Continuity Incident, such communications shall be proportionate to the severity of the incident.

**Monitoring and Measuring calibration & maintenance**

**Equipment**

Listed below is a sample of equipment which has been calibrated or inspected. Items which are shown to be out of date are awaiting new certificates to arrive. All procedures in the process of equipment calibration are listed within the Backroom Solutions application.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Equipment | Ser no | Date of calibration/maintenance | Expiry date | Company |
| Harness Gforce P-30 | 13085478 | 04/08/22 | 04/02/23  Serviced on 23/03/23 awaiting certs | ESS |
| Harness JSP FA7040 | 1266 | 04/08/22 | 04/02/23  Inspected on 23/03/23 Failed | ESS |
| Drager CF10 | BRRA-0617 | 04/08/22 | 04/08/22 | ESS |
| XAM 2500 Gas Monitor 2 Each | ARNB-2691 | 23/03/23 | 22/03/24 | ESS |
| Weigh Bridge  Avery Weigh Tronix | 135150564 | 28/09/22 | Sept 23 | Avery Weigh Tronix |

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

The organisation has not met the requirements of clause 7. Management control of training and competency for emergency preparedness. As well as the company control and documentation of infrastructure compliance and equipment maintenance .The following was observed and documented.

At the time of the audit the Fire Marshaller Certification had lapsed, training has been booked for recertification

No ladder register in place or ladders tested and registered. All sites

1. **Operation**

**Detail and evidence:**

**Enquiries, Quotes and Sales Orders for Wet Waste.**

Enquiries are mainly received via email. The enquiry is entered on the Big Change system and quotes issued sent by email. On receipt of a customer PO an order acknowledgment is sent, and the order actioned by the Manager. A works order is raised for actioning within the system. Resources applied. Tablet/ mobile phones are used by operating staff to access the system. Walk around of the vehicles, job list updated with work, RAMs/ jobs can be updated with information and pictures. WTN is produced on the system for any material removed from customers sites. Then transported to disposal sites.

Invoicing done through SAGE at the moment (Process underway to be integrated into Big Change)

Examples of A1 Group Wet Waste orders reviewed from enquiry through to delivery:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Customer** | **Enquiry date** | **Description / Qty** | **PO Date** | **Despatch Date**  **Delivery Note No.** |
| IAS Enviro | Email dated 08/3/23 | 2 x sites 1000g/2000g Disposal at Biffa | Email 08/03/23 no OX160323 | 16/03/23 ID E145775 |
| Royal parks | Telcom dated 25/04/23 | Empty toilet blocked  Disposal at Biffa | N/A | 25/04/23 ID S149829 |
| Willis Bros | No quote presented | Manhole clearance/jet washing | Email 12/04/23 no M2924/0016 | 21/04/23 ID E148703 |

WTN not available due to processing to invoicing for jobs listed in table. The Big Change system documents WTN for each job.

The organisation undertakes wet waste removal at customer sites and also within company operations. On review the Group documents RAMs are produced for individual jobs depending on the environment the company are operating in. There is a requirement to use various items of equipment that require maintenance or calibration. See table in Section 7.

**Site visit customer.**

**Principal Contractor: Thames Water**

**Job Started:** 26/04/23

**Duration:** one day

**Activities on site:** Removal of Wet Waste & Cleaning of containers

**Hazards on site:** Working near water areas, slips, trips, and falls, moving vehicles, manual handling, jet washing, and use of hand tools.

**PPE on Site:** Safety shoes, High Viz, protective trousers, Hard Hat and Gloves and goggles if required.

There were 4 A1 Group employees on site.

A1 Group are contracted to conduct the regular cleaning of the osmosis’s tanks situated on site. This will consist of operations, once the tank is empty and declared safe, the removal of residue cleaning material (mussels) and the transportation of waste material from site.

**Site Specific Risk Assessments/ Method Statements:**

Observed on site documented processes and procedures for the following information. RAMS for A1 Group situated at the Farmoor Treatment Plant for Thames Water dated 25/04/23

The following relevant information was also documented within the file. Employee qualifications, description of work, Site inductions, and Risk assessments covering all aspects of work undertaken on site.

The documents listed were observed:

* RAMS for task being completed
* Thames Water permit to pump water
* Permit signature Log Thames Water

The Risk Assessments dated 25/04/23 included the following information:

* Site location and Project name
* Risks to employees and public
* Potential hazards
* Control measures
* Protective measures to be used
* PPE to be used
* Method statements

**Waste:**

All waste on site is collected by A1 Group for processing.

**Other documentation reviewed:**

Quality, Health, Safety, and Environmental Policy dated January 2023.

**Maintenance & Control of Equipment:**

Equipment used on the site include:

* Renault 32 T Reg no DO17 POO
* Renault 32T Reg no AA17 POO

There is a first aid kit and a fire extinguisher available in company trucks on site. The site is secured with a fence with ample warning signage situated at prominent points around the site. The public footpath has been diverted away from any work areas and is separated by a security fence. All machinery, stores and equipment are secured when not in use in locked storage containers. All A1 Group employees must hold a 12-month Thames Water Induction permit to conduct operations on site.

**Emergency Preparedness/Communication:**

First Aid facilities are provided within the Welfare Facilities. Details of First Aid procedures are conveyed during Site Induction for both employees and external contractors by the Site Supervisor. Buildings situated on site are used for site office, canteen, and ladies / gents’ toilets. Communication is conducted via daily briefs and toolbox talks.

**Waste Management**

Reviewed was the Environmental Operating Procedure for Waste Management. All waste produced by or that which becomes the responsibility of A1 Group to dispose of must be done so within the confines of the law. All waste is segregated, securely stored, and kept safe to prevent accidental mixing of Hazardous wastes, corrosion or wearing of containers, accidental spillages, or leaks. In house equipment and employees are used for the removal of all waste on A1 Group operating premise and a WTN will be prepared for the Transfer of all waste, this will be provided by the waste carrier and a copy kept by both parties. Hazardous/special waste consignment notes will be retained by A1 Group at the site where the waste is produced for a minimum of 3 years from the date of the removal of the waste. The following was evidenced during the audit:

* Scrap Metal Dealers Act 2013 Licence no 033533 expiry date 31/03/26 Registration authority Wokingham Borough Council.
* Metal Recycling Site Disposal Licence no 83313 dated 31/03/20
* Certificate of Registration under the Waste Regulations 2011 CBDU71782 expiry 14/12/24 Upper Tier Loo Hire
* Certificate of Registration under the Waste Regulations 2011 CBDU186269 expiry 30/07/23 Upper Tier Car Spares
* Certificate of Registration under the Waste Regulations 2011 CBDU66714 expiry 28/11/24 Upper Tier Car Spares

**Vehicle Depollution**

The company conducted de pollution of vehicle on site for processing as either spares or scrap. The operation of engine recycling is undertaken on site, the process involves the removal of the power unit from vehicles and then the removal of all liquids from the engine unit. These liquids are then stored on mass for transportation to the appropriate disposal/reprocessing sites. Once the engines have had their liquids removed, they are processed for sale to the relevant organisations. This is undertaken as mass batch processes. Depending on the construction material of the engines will determine the onward journey. The following are examples of engine process:

Example 1

* Ticket no 1347107 (material out)
* Date 20/04/23
* EWC code 170402 alloy engines
* Total weight 22,560 kg
* Hauler MT Barnsley
* Invoice
* Dated 24/04/23 serial no SB007810
* EWC code 191203 Irony aluminium
* Buyer Automet licence no CBDL134236

Example 2

* Ticket no 133880 (material out)
* Date 30/01/23
* EWC code 170402 alloy engines
* Total weight 27,100 kg
* Hauler MT Barnsley
* Invoice
* Dated 31/01/23 serial no 274
* EWC code 191203 Irony aluminium
* Buyer Richards and Jerrom Ltd

Example 3

* Ticket no 1335884 (material out)
* Date 03/01/23
* EWC code 170402 alloy engines
* Total weight 26,780 kg
* Hauler MT Barnsley
* Invoice
* Dated 09/01/23 serial no 212
* EWC code 191203 Irony aluminium
* Buyer Richards and Jerrom Ltd

All liquids removed from the process are stored in the mass waste liquid storage facility situated on site. Once full this will be removed offsite Documentation presented for audit are as follows WTN EQ290 dated 01/03/23 CNC AWOKIN/92766 Vehicle reg DY13 9BZ Carriers CBDU125624 EWC 130205 Waste engine, gear, and lubricating oils 2047 kg Tanker road 2300 Hazard code HP4,HP7 SIC 45200. Hazard Waste Consignment note.

**Transport**

On review of documentation the organisation utilise a . The organisation outsource PMI 6weeks, MOTs defects. All activities are conducted offsite. The fleet consist of 250 vehicles Group wide with 200 being functioning on road vehicles. The company utilise R2C to control and document, an internal system-maintained schedule is kept as a redundancy option. All processes are followed to ensure all legal obligations are complied with The following observations were made listed in the table below:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Equipment | Ser no | Date MOT/LOLER | Service date | Tach | Tax |
| 32t Renault | Do17 POO | 31/10/23 | 12m 31/10/23  6w 08/05/23 | Oct 24 | May 23 |
| 32T Renault | AA17 POO | 31/04/24 | 12m Mar 24  6w 29/05/23 | 01/03/24 | Feb 24 |
| 32T Scania | BU20 YBA | May 24 | 12m May 24  6w 24/05/23 | 06/01/24 | May 24 |
| Volvo HIAB 32T | H1 AAB | 31/10/23  LOLER 06/10/23 | 12m OCT23  6w 25/05/23 | 07/02/24 | Dec 23 |

**Driving licences**

On review of the documentation the organisation document regular checks on the employees’ qualifications and offences which may have an effect on the company operations. The following were evidenced:

JM Motor vehicle and towing 7.5T Licence ROD 04/09/31

IR C1 44 tonner and drag CPC card 09/09/24 Licence ROD 17/04/48

RL C1 44 Tonner and drag CPC 09/09/24 Licence ROD 05/03/51

Drug and Drink testing is conducted by the company on a random grounds on all drivers, the company operates a zero policy on this.

**CoSHH**

For its CoSHH assessments, the business uses the Sypol system, which is then stored in the Back-office application.

A review of assessments during the audit found that they were current. Below are examples of CoSHH registers and assessments from Sypol system:

* Battery Acid dated 20/09/21 ID no 80920 assessed by CO
* Engine Oil dated 31/01/22 ID no 80314 assessed by CO
* Scale off dated 20/09/21 ID no 80911 assessed by CO
* Diesel dated 16/10/22 ID no 80326 assessed by CO

**Purchasing Including Approved Suppliers**

The organisation holds an approved supplier list, this is for their main suppliers and does list all companies who provide products to A1 Group. Each part of the business have their own suppliers list. The following are examples of each part of the business:

* Car Spares
* ALPHAMAC Alpha Machine Knife Co.Ltd
* CBOC C.B.O.C Lubricants Limited
* JSWEEPER Johnston Sweepers Limited
* Loo Hire
* INDESPEN Indespension Ltd
* BEECHSGA HRVS Beech's
* TRIMMANI Trimmania Ltd
* Wet Waste
* CELLULAR Cellular Services Ltd
* MCHVEH MCH Vehicle Rental
* POLYETHY Polyethylene Pipelines Co Ltd

**Emergency Preparedness Wokingham site**

First Aid facilities are provided within the Welfare Facilities. 2 qualified first aiders are available at all times on site these are documented as JC and MR (example) their contact details are available (via radio). Details of First Aid procedures are conveyed during Site Induction for both employees and external contractors by the Site Supervisor. Portacabins situated on site are used for locker rooms, canteen, with ladies / gents’ toilets available on site. Communication is conducted via daily briefs and toolbox talks. The following documentation was evidenced

* First aid certs JS cert no QN0192705 dated 01/06/2021
* Fire Marshaller JC dated expiry 02/04/2022 BAM Construction training
* Fire extinguishers serviced by RES Fire Protection Engineers Fire dated 2/23
* Fire Prevention Plan Version 5.3 dated 01/01/23
* Fire Emergency Evacuation Plan Version 1.0 dated 01/01/23

N/C At the time of the audit the Fire Marshaller Certification had lapsed, training has been booked for recertification

N/C Environmental emergency practise exercise has not been conducted or documented

**Site Visit to additional Operating Location**

The organisation are currently operating its Loo Hire and Wet Waste operations out of a 2nd site located at Long Acres, Waterloo Road, RG40 3DA. The depot is currently undergoing a major refurbishment to its infrastructure which is due to be completed by July 23. The Loo Hire and Wet Waste operate out of the same site but utilise different offices to conduct the relevant tasks associated with the business.

Site Visit – A1 Loo Hire, Long Acres Waterloo Road RG40 3DA.

0800 Start 25/04/2023.

ISO 9001 -14001 – 45001 -SSIP.

Auditor Team Member Andrew Payne:

**Site Visit:**

Loo Hire is part of the A1 Group and is located in a large yard which contains plant and equipment for A1Waste and A1 Loo Hire, two separate offices are located in the yard with a number of storage sheds which house equipment such as generators – COSHH – lifting equipment (Chains/straps) etc. A vehicle workshop is in place to service both company’s vehicles which contain servicing pits/welding equipment and general servicing tools. A bunded diesel refuelling point is located next to the servicing bay together with Ad Blue containers together with a metals skip, a large concreate bund for portaloo chemicals is in place which is in the process of being renovated with the surrounding area being re-concreated to form runaway to a new interceptor, paint of hazard areas/workways is planned for the near future. Within the A1 Loo Hire office is a notice board which contain documentation such as ISO certificates – FORS certificates for A1 Group companies – insurance certificates, throughout the office and yard areas first aid kits were evident and in the office safety signage was evident.

**Operational Controls:**

Enquiry/Toilet Hire/Purchasing.

The company have two forms of customers, one who pays cash and another who have accounts with A1 Loo Hire, enquiries are received either via email or over the phone with customer ranging from the general public to large scale music festivals and various industries. When an enquiry is raised an purchase order is raised via Inspire which also creates the work order, delivery note and collection order, payment for single orders is immediate with an account for regular customers, new customers are subject to credit checks. At the time of the audit one customer had an outstanding bill of £99317.64p, annual credit checks are completed to see if customers are still viable to pay.

Sample:

Local Toilet Hire – order date 24/04/2023 – Delivery date 26/04/2023 – order No 00003706757769 – delivery to London.

Purchasing sample:

Purchasing is completed for A1 Loo Hire by the company office.

Sample:

• Customer Pump International – 30 pumps ordered – delivery note number 33458 – PO date 23/04/2023 – work order 303142 – value £1191.30p

• Customer Plastic Solutions – 50 filters ordered – 30sink drain plugs – PO date 11/04/2023 – delivery date 12/04/2023 – work order 303158.

**Risk Assessments:**

All risk assessments are contained on the company “Back Office” site which all staff have access to with read only rights with all risk assessments subject to annual review, latest review dated January 2023. Each risk assessments record: Activity / Task / Equipment - Controls currently in place - Threat / Hazard – Frequency Value 1-5 - Vulnerability Value 1-5 – Impact.

Risk Assessments sampled:

• Operating a skip loader version 1.

• Confined space version 1.

• Fork-lift Truck Operations version 1.

• Toilet Servicing onsite version 1.

• Loading/Unloading of Plastic Toilets version 1.onsite version 1.

• Loading/Unloading of Plastic Toilets version 1.

**Accidents/Incidents:**

The company have recorded on RIDDOR related accident in the last audit year, recorded within the latest Health and safety minutes (1 Accidents and 6 vehicle incidents for 2023).

Sample:

Notification No A3BB159B5B – date submitted 26/01/2023 – accident date 11/01/2023 – slip/trip/fall – RH stumbled, fell and rebar pieced his wrist. The company have recorded no environment incidents of note but have been visited by the Environmental Agency, no findings were raised.

**Training:**

Induction training into the company is recorded on an induction training form which records Welcome to the A1 group - Our values - Access to site -Staff Parking - Speed limits on site - Calling in sick/late

PPE/Uniform - Canteen and wash facilities – Smoking - Drugs and Alcohol - Fire Evacuation Procedure

First Aid - Incident Reporting - Disciplinary Procedures - Back Office - Booking Holiday - Manual Handling

Working at height - Slips, trips and falls – Spillages - Sharps and suspicious liquids -Loading and unloading - Forklift Safety. All training records are stored on the A1 Group “Back Office” site under SAGE HR, for 2023 Health and Safety training is recorded as: H&S Annual Refresher training will take place3 in May 2023 at Wokingham and then be rolled out to the Depots around the country. For 2022 training is recorded on 21 April 2022 8am – 5pm

A1 Group Limited – Highland Avenue Wokingham – trainer SW FCIPD Health and Safety and Human Resource Advisor.

JR Consulting Limited – historical A1 Group have used JR Consulting as their external resource.

**Consultation Participation:**

Communication within the company was noted as very good with all staff demonstrating knowledge of requirements. Internal communication is through consultation with staff via meetings and external communication is through inductions, toolbox talks, safety alerts and task briefings, all staff undertake staff inductions with records seen. Posters are located around the office which includes the Statutory H&S poster; company insurances and certificates achieved. Accident reporting and near miss is reported in the management meetings and communicated to staff on site. Training sessions are conducted for all site staff and management on HSEQ procedures, Health & Safety refresher and update training is to be recorded to support evidence of effective operational control. The compliance manager has the responsibility of communicating all Health and Safety matters throughout the company to all staff. Staff are encouraged to bring to the attention of the contract managers any concerns they have about health and Safety matters. The company conduct operational and Health & Safety Meetings, these can be with staff through toolbox talks and with clients regarding Health and

Safety on site, these meeting will provide an opportunity for the views and concerns of workers to be raised and escalated to management as required.

**Organisational Knowledge:**

Knowledge requirements which may affect operational requirements pertinent to the provision of services are gained via industry related publications, websites, and advice received from external consultancy where appropriate. Relevant information are communicated, discussed and shared during management meetings, clients meetings and also during the annual Management Review. Implementation of responses to changes in governance is planned and coordinated by the Top Management where appropriate.

**Resources, including People, infrastructure, and Environment for operation:**

The Organisation has determined and provides the work environment it requires to ensure service conformity to applicable rules and regulations together with the required conditions under which the work is being performed. i.e., Noise, lighting, heating, air quality etc. Infrastructure is maintained and adequate for the activities being carried out at the Head office and regional office location, the building and infrastructure is maintained by the company who owe all buildings and equipment, PPE is provided by the company.

**Internal communication:**

Method for internal communication is established and Managing Director is responsible for communication channels.

• Internally communicate information relevant to the integrated management system, including changes to the integrated management system, as appropriate.

• Ensure its communication process enable(s) persons doing work under the Organisations control to contribute to continual improvement.

It is ensured that the communication process is open, and environment is created to bring the ideas for HSEQ improvement.

**External communication:**

Externally communicate information relevant to the HSEQ and Business Continuity is done as per compliance obligation or concerns of interested parties. Such channels of communication are established for communicating to the government authority as well as to submit various obligation reports to the external interested parties as per compliance obligations. Decisions shall be made by a Director on what external communication shall be required in the event of a Business Continuity Incident, such communications shall be proportionate to the severity of the incident.

**Non-conformances: A1 Yard. Emergency Preparedness: Major**

Gas cage adjacent to AI Waste office building, close to entrance/exit.

Generators which are filled with petrol are stored in storage sheds which also contain flammable liquids and various chemicals.

Hydraulic oil drums (sealed and open) not bunded.

No spill kits located adjacent to liquid storage areas.

Racking has not been load tested.

Lifting chains/hooks/straps not recorded or tested (LOLER).

No records for storage shed roller shutters being serviced/tested.

No ladder register in place or ladders tested and registered.

Walkways to separate vehicles/pedestrians are located/painted in the yard.

All storage sheds should have fire exit/fire points signage located.

**Minor:**

No trained personnel for first aid or fire warden for A1 Loo Hire, however on site there are first aiders from other A1 Group companies.

Opportunity for Improvement.

Sealed bottles of environmentally friendly chemicals should be stored on a bund or placed in drip trays in a COSHH locker.

Review type of and number of fire extinguishers for each location.

General housekeeping of all areas needs to improve.

End of Site visit report for Long Acres Depot

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

Evidence reviewed has demonstrated that not all the requirements of clause 8 have been met. The following were observed having not met the requirement of the standards (ISO 45001: 2018 & ISO 14001:2015):

At the time of the audit the Fire Marshaller Certification had lapsed, training has been booked for recertification

Environmental emergency practise exercise has not been conducted or documented

Gas cage adjacent to AI Waste office building, close to entrance/exit.

Generators which are filled with petrol are stored in storage sheds which also contain flammable liquids and various chemicals.

Hydraulic oil drums (sealed and open) not bunded.

No spill kits located adjacent to liquid storage areas.

Walkways to separate vehicles/pedestrians are not located or painted in the yard.

All storage sheds should have fire exit/fire points signage located

1. **Performance Evaluation**

**Detail and evidence:**

**Measurement and Analysis:**

As detailed within the management review KPIs are set throughout the organisation and communicated to employees via electronic dashboards as well as through regular meetings with fresh targets set when goals are achieved. KPI’s are also discussed through the weekly operational meetings and targets examples viewed included.

* Faster Bank payments for customers.
* We need to look at creating a better and wider reach for new jobs that can come off of the back of current contracts and jobs that we have
* Send out new welcome and marketing packs. We are missing contracts due the system changing so call arounds, social events, event shows etc we need to be pushing for in order to get more jobs

**Customer Feedback:**

Customer satisfaction is measured through Google reviews, emails, and customer satisfaction surveys. These are discussed at Senior management meetings for any required action. Examples viewed included:

* Google Review Jan 23 3-star Summary is the core is good, need to take more care when fitting. Feedback sent
* Google review Dec 22 5-star Summary John organised collection on the day promise. Prompt, professional service.
* Google review Dec 22 5-star Summary Great Place, great worker they are helpful

Google reviews are answered, and processed for investigation if required, top management are very much involved and take action when required if feedback is either negative or positive.

**Management Review:**

A full Management Review meeting was convened on the 14/03/23 for each part of the Group attended by the following Sally Pike – Director, Russell Pike Director, Clive Owen Director, Chloe Djemal Finance Director, Operations Manager, Stuart Cawthorne Transport Manager, Sean Whittle HR Consultant Emily Russell - Minutes

The minutes were reviewed showing discussions on the Quality / Environmental areas and included H&S topics however, the meeting agenda met the criteria of the relevant standards. The minutes are available for all employees to read and is documented within the Back Room system. Thew following examples of subjects were discussed on all meetings:

* Review of previous meetings
* Actions Outstanding
* Policy Review
* Communications
* Resources
* Participation and Consultation
* Accidents / Incidents

**Internal Audit**

The Internal Audit programme for A1 Group was viewed with audits covering the complete IMS/H&S and processes planned for Jan to December 2023. Audits were found to be detailed and completed to the schedule since the last visit and the following audit reports were among those viewed:

Internal Audits are conducted by the external consultancy agency, an audit was conducted on 13/09/23, report conducted by JR Consultants was reviewed which showed the following areas were audited:

* Corrective Actions
* Aspects and Risks
* Legislation and Compliance
* Training and Awareness
* Document control
* Customer requirements/feedback
* Equipment maintenance

No Non- Conformances recorded.

The following audits were also observed:

* Audit report dated 21/06/23 conducted by JR Consultants no n/cs
* Scope, context and interested parties
* OP002 Environmental aspects
* OP007 Waste management and the environment
* OP008 COSHH
* OP011 Monitoring and measurement
* OP012 Nonconformances, corrective and preventive actions
* Site walk.
* Management Review
* Audit report dated 17/04/23 conducted by JR Consultants no n/cs

o Loo Hire Process

o Wet Waste Process

o Procurement

o Risk Assessments

o Environmental Aspects

o Calibration & Maintenance

o Waste Management and the environment

* Health and Safety audit A1 Car Spares Wokingham dated 08/11/22 conducted SW 11 recommendations.

**Summarise Conformity with Requirements:**

The organisation has met the requirements of clause 9. An good detailed management review. I would see this as good practice, a full review with good detail of what was covered.

1. **Improvement**

**Detail and evidence:**

**Complaints, non-conformances, corrective and preventive actions:**

This is detailed within the 0323 14 action improvement log– Non-Conformance, Corrective Action, and Improvement. All issues are recorded within the log, the log was reviewed showing 7 Non-Conformances raised to date. The following are examples:

* NC 371 raised Nov 22 Flammable Liquids Ideally be stored in lockable area and away from ignition sources ongoing.
* NC 372 raised Nov 22 Fire Extinguishers Ensure all visible and hooked on wall ongoing
* NC 373 raised Nov 22 Forklifts - servicing / LOLAR . Conduct inventory of all forklifts and when servicing required ongoing.
* NC 358 HSE raised Jan 23 Areas at bottom of scrap yard was a concern with a grab crane operating at same time as customers were unloading scrap and could get hit bay the arm Decided to have barrier system operated by banks person at bottom of the slope the area. Barrier closed when grab crane operating ad customers not allowed in area until grab crane ceases to operate

HSE report dated 20/01/23 Reference no 4743598

Required action

For persons unloading waste in locations where 360 grab machinery is operating you could provide a separate, safe area for drivers to unload. Alternatively, implementing a system of work whereby the 360s are non-operational whilst drivers unload could also be considered.

You need to review your risk assessment, assess your current practices, and implement suitable controls. You should ensure that the details are recorded in writing and communicated to employees and members of public as required.

Improvement Notice

I am issuing Improvement Notices **(IN/PJW/SP/100123/01 & (IN/PJW/RP/100123/01)** requiring you to remedy this contravention. The compliance date for the Notice is **24th March 2023** You should contact me by this date to advise what actions you have taken to comply with the Notice and provide evidence of those actions.

EPR Compliance Report

Report Id 83313/0452767 dated 01/03/23

Noise Management Plan Version 4 review

Report details:

We confirm that we are partially approving the NMP on the terms set out below. We are satisfied your NMP identifies and sets appropriate measures to minimise the risks of pollution from noise during the normal operating hours set out on page 1 of the NMP. The NMP states that the normal operating hours are between 8am to 5pm Monday – Friday and 8am to 4pm on Saturdays, with the site closed on Sundays and Bank Holidays. The NMP also states that ‘on rare occasions, there may be a need to work outside of our normal operating hours, such as when there is a breakdown of machinery’. The NMP relates to the assessment of noise during normal working hours and conditions only. Our approval of the NMP therefore relates only to operation within the normal operating hours set out on page 1 of the NMP. If we attend outside of these hours and substantiate noise pollution, this may be a breach of Permit condition 3.4.1. The NMP (V4) no longer has an entry for noise and noise mitigation from the use of a granulator as this has been decommissioned by yourselves as confirmed in your email of 22/02/2023.

**Accident/Incident and Near Miss investigation and Communication**

There is a reporting process for incidents, incidents, and near misses in OP 009, which is presently on issue 3. A folder for accident reports and a form for reporting near misses are maintained by the organization. At the Monthly Health and Safety meetings, accidents and near misses are reviewed and discussed. Health and Safety minutes are displayed on Welfare area notice boards. Reported incidents in 2022 are as follows 1 major, 1 minor and 1 RIDDOR. 2023 has no reported incidents/accidents or near misses for 2023 at the time of this audit.

**Accidents/Incidents: (AP)**

The company have recorded on RIDDOR related accident in the last audit year, recorded within the latest Health and safety minutes (1 Accidents and 6 vehicle incidents for 2023).

Sample:

Notification No A3BB159B5B – date submitted 26/01/2023 – accident date 11/01/2023 – slip/trip/fall – RH stumbled, fell and rebar pieced his wrist. The company have recorded no environment incidents of note but have been visited by the Environmental Agency, no findings were raised.

**Improvement Monitoring:**

The organisation conduct regular reviews of required actions/improvements with monthly H&S meetings conducted all department managers present. All improvements are logged on the 0323 14 action improvement log documented on the Back Office solution application. The improvements are also discussed at management meetings for all parts of the business. The following are examples of proposed improvements documented with the management minutes for Car Spares/We Waste:

* Bins are preferable for non-ferrous area of the yard after a site visit, we have had.
* Need to price up and check what bins we have and what ones we would need. Also wasn’t to look at building actual bays for nonferrous as well, to help minimise the queues that can form on busier days.
* We need to be aware of how the yard looks and what can be done to improve it.
* Vehicles to be looked at again, with regards to how old they are getting and what their re-sale value is once we are looking to replace.
* We have some new lorries on order and need to look at orders for next year if management feel like we need anything extra. Lorries, transporters, and forklifts all to be looked and replaced eventually.
* Need to start looking and monitoring the drivers and their break times, how often they are on breaks and if they are taking them at the correct time. Monitoring of the vehicle trackers. Wages also need to be looked at, as well as the amount of overtime and bonuses paid to staff members.
* Service kits for each of the vehicles, we need to look at making sure that they are kept in the correct vehicles and logged in and out each day when needed. Too many goes missing or is damaged and then not replaced.
* We have now got a system in place so that weekly audit across all Bennetts site for WWW can be completed so all sites need to ensure all Sites complete Internal audits and record any issues

**Summarise Conformity with Requirements:**

The organisation has met the requirements of clause 10

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** |
| Clive Owen | Director |
| Sean Whittle | HR Consultant |
| Steve Clifford | JR Consultants |
| Graham Oatley | Lead Auditor |

|  |  |  |
| --- | --- | --- |
| 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 | Clive Owen |  |
| Personnel responsible for monitoring employees’ health | Clive Owen |  |
| The employees' representative(s) with responsibility for OH&S | Clive Owen |  |

1. **Activities planned but not covered on this visit and require planning for the next visit.**

|  |
| --- |
|  |

1. **Head Office/Locations/Branch Offices visited during this audit**

|  |  |  |
| --- | --- | --- |
| **Date** | **Location** | **Auditor(s)** |
| 24-26/04/23 | HO Wokingham | GO/AP/MR |
| 25/04/23 | Loo Hire/Wet Waste depot site | GO/AP/MR |

1. **Client/Contract Sites/Temporary Sites visited during this audit (if applicable).**

|  |  |  |
| --- | --- | --- |
| **Date** | **Location** | **Auditor(s)** |
| 25/04/23 | Wet Waste customer site | GO |

1. **Locations/Branch Offices**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| All permanent Locations/Branch offices for which certificates are required **(Check on MS Dynamics**) |  |  |  |  |
| are current and correctly identified | Yes: |  | No: | x |

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

|  |  |
| --- | --- |
| **ADDRESS** | **Bennett’s Yard, Longacres, Waterloo Road RG40 3DA** |
| **SCOPE** | **Loo Hire and We Waste collection** |
| **DETAILS** | **This has been audited in previous audits but was not included in the certification scope.** |

|  |  |
| --- | --- |
| **ADDRESS** |  |
| **SCOPE** |  |
| **DETAILS** | **Consider additional processes, hazards, risks, and aspects specific to the site.** |

|  |  |
| --- | --- |
| **ADDRESS** |  |
| **SCOPE** |  |
| **DETAILS** | **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** | **Yes** |

1. **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:**

|  |
| --- |
|  |

1. **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.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Lead Auditor** | TBC | **Additional Auditors (Expert)** | | TBC | |
| **Standard(s)** | ISO 9001 & 14001:2015  ISO 45001:2018 | | **Type of Audit (e.g. Surveillance)** | Surveillance V5 | |
| **Audit Dates** | Oct 24 | **Location(s)** | HO  Loo Hire and Wet Waste depot site  Customer site | | |
| **Audit Start Time** | 09:00 | Does Client need to confirm site visit with ISOQAR Head Office prior to next visit **YES/NO** | | | Yes |
| **Audit Language (if not English)** |  | Is Recertification Planning Required **YES/NO** | | | No |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Management Processes** | | |  | | |
| **Date** | **Onsite / Remote** | **Time (or AM/PM)** | | **Activities to be Audited** | **Auditor** |
|  | **Onsite** |  | | **Day One** |  |
| **TBC** | **Onsite** | **AM** | | **Opening Meeting** | **TBC** |
|  |  |  | | **Site walk** |  |
|  |  |  | | Context of the Organisation, |  |
|  |  |  | | Needs & Expectations of Interested Parties |  |
|  |  |  | | Scope of the IMS |  |
|  |  |  | | Management Systems and Operational Processes, including Interaction of Processes. |  |
|  |  |  | | Leadership & Commitment - Senior Management interview & Customer Focus |  |
|  |  |  | | Quality / Environmental Policies including Communication |  |
|  |  |  | | Organisational Roles, Responsibilities, Accountabilities & Authorities |  |
|  |  |  | | Quality / Environmental Objectives & Targets, (Including Improvement) |  |
|  |  | **PM** | | Actions to Address Risks & Opportunities |  |
|  |  |  | | Planning of Changes to the QMS |  |
|  |  |  | | Environmental Aspects |  |
|  |  |  | | Compliance Obligations; Environmental |  |
|  |  |  | | Resources – training, Competence & Awareness |  |
|  |  |  | | Production & Service Provision / Release of Product  Loo Hire  Metal recycling  Vehicle Depollution |  |
|  |  |  | | Communication, Documented Information |  |
|  |  |  | | End of day review |  |
|  |  |  | | **Day Two** |  |
| **TBC** | **Onsite** | **AM** | | Organisational Roles, Responsibilities, Accountabilities & Authorities | **TBC** |
|  |  |  | | Quality / Environmental Objectives & Targets, (Including Improvement) |  |
|  |  |  | | Product & Service Requirement - sales |  |
|  |  |  | | Control of Externally Provided Products & Services - procurement |  |
|  |  |  | | Monitoring & Measuring Resources; including Plant & Equipment Maintenance & Calibration.  Operational Planning & Controls; including Waste Management and facilities management |  |
|  |  |  | | Communication, Documented Information |  |
|  |  | **PM** | | **Site Visit (Loo Hire site)-** Operational controls, Aspects on site, Lifecycle of equipment, calibration equipment, experience, Interview / awareness of standards. Safety on Site , Risk assessment, COSHH, Vehicle used and maintenance of it. | **TBC** |
|  | **Onsite** |  | | **Site Walk Loo Hire Depot** |  |
|  |  |  | | Control on Nonconforming Product |  |
|  |  |  | | Emergency Preparedness - Response & Testing |  |
|  |  |  | | Monitoring, Measuring & Analysis.  including Customer Satisfaction & Evaluation of Compliance |  |
|  |  |  | | Management Review |  |
|  |  |  | | Internal Audits |  |
|  |  |  | | Non-conformance, corrective actions including Complaint Management, Environmental and H&S Accidents / Incidents |  |
|  |  |  | | Continual Improvement |  |
|  |  |  | | Report writing |  |
|  |  | **16:00** | | Closing meeting |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

**Locations/Branch Office Visits**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Time (or AM/PM)** | **Activities to be Audited** | **Auditor** |
| **TBC** | **AM/PM** | **HO Wokingham** | **TBC** |
| **TBC** | **AM/PM** | **Loo Hire/We Waste depot** | **TBC** |
| **TBC** | **AM/PM** | **External customer site Loo Hire** | **TBC** |

**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 | A1 Group Ltd |

This plan commences:

* On the date of the first surveillance visit following the initial audit (stage 2) or.
* On the date of the Surveillance Audit following the Re Certification Audit.
* At the next surveillance visit if the plan requires amending or to take into account extensions to scope.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Visit 4 | Visit 5 | Visit 6 | Visit 7 | Visit 8 | Visit 9 |
| **Month and Year** | Apr 23 | Oct 23 | Jan 24 | Oct 24 | Apr 25 | Oct 25 |
| **Number of Days** | 2 | 2 | TBD | TBD | TBD | TBD |
| **Standards** | 9001/14001/ 45001 | 9001/14001/ 45001 | 9001/14001/ 45001 | 9001/14001/ 45001 | 9001/14001/ 45001 | 9001/14001/ 45001 |
| **Area/Function/Process/Activity/Site Visits (temporary sites)** |  |  |  |  |  |  |
| Site Walk (taking into account car spares yard/office, tyres, crane area, loo hire storage area, office, Access and egress from the site, control of the public and visitors) |  | ✓ | ✓ | ✓ |  | ✓ |
| 4.1 Understanding the organisation and its context |  | ✓ | ✓ | ✓ |  | ✓ |
| 4.2 Understanding the needs and expectations of interested parties |  | ✓ | ✓ | ✓ |  | ✓ |
| 4.3 Determining the scope of the Quality / Environmental / OHS Management System |  | ✓ | ✓ | ✓ |  | ✓ |
| 4.4 Quality / Environmental / OHS Management system, its processes, and their interactions. |  | ✓ | ✓ | ✓ |  | ✓ |
| 5.1 Leadership & Commitment (interview with top management); | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 5.2 Quality, Environmental and OHS Policies | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 5.3 Organisational Roles & Responsibilities | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 5.4 Consultation and participation of workers | ✓ |  | ✓ |  | ✓ |  |
| 6.1 IMS Risks & Opportunities (including H&S risks) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 6.1.2 Environmental Aspects | ✓ |  | ✓ |  | ✓ |  |
| 6.2 Objectives & Planning to achieve them | ✓ |  | ✓ |  | ✓ |  |
| 6.3 Planning of Changes) | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 6.1.3 Compliance Obligations |  | ✓ | ✓ | ✓ |  | ✓ |
| 7.1 Resources, Infrastructure – (Lifting equipment maintenance, LOLER, vehicle maintenance, Plant, and site maintenance / Equipment maintenance / PUWER) |  | ✓ | ✓ | ✓ |  | ✓ |
| 7.2 Competence | ✓ |  | ✓ |  | ✓ |  |
| 7.3 Awareness; | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 7.4 Communication; | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 7.5 Documented Information – creating & updating | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Scrap waste process |  | ✓ | ✓ | ✓ |  | ✓ |
| Wet waste process | ✓ |  | ✓ |  | ✓ |  |
| Loo Hire | ✓ |  | ✓ |  | ✓ |  |
| Transport | ✓ |  | ✓ |  | ✓ |  |
| Procurement/approval of suppliers/contractors |  | ✓ | ✓ | ✓ |  | ✓ |
| Purchasing |  | ✓ | ✓ | ✓ |  | ✓ |
| Vehicle de pollution | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Accident/Incident/Near miss process |  | ✓ | ✓ | ✓ |  | ✓ |
| Control of COSHH |  | ✓ | ✓ | ✓ |  | ✓ |
| Emergency Preparedness & Response | ✓ |  | ✓ |  | ✓ |  |
| Waste Management |  | ✓ | ✓ | ✓ |  | ✓ |
| 9.1.2- Customer Satisfaction; | ✓ |  | ✓ |  | ✓ |  |
| 9.1.3 - Analysis and Evaluation | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 9.2 - Internal Audit; |  | ✓ | ✓ | ✓ |  | ✓ |
| 9.3 - Management Review | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| 9.1.2 Evaluation of Compliance |  | ✓ | ✓ | ✓ |  | ✓ |
| 10.2 Nonconformity and corrective action |  | ✓ | ✓ | ✓ |  | ✓ |
| 10.3 Continual Improvement |  | ✓ | ✓ | ✓ |  | ✓ |
| Closing Meeting | ✓ | ✓ | ✓ |  |  |  |
| SSIP Checklist | ✓ |  | ✓ |  | ✓ |  |
| Site Visit | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Recertification Planning |  | ✓ |  |  |  |  |
| Recertification |  |  | ✓ |  |  |  |

**Head Office/Locations/Branch Offices Visit Plan**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Visit 1 | Visit 2 | Visit 3 | Visit 4 | Visit 5 | Visit 6 |
| **Head Office** | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Loo Hire/Wet Waste Depot | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Loo Hire Customer site |  | ✓ | ✓ |  | ✓ |  |
| Wet waste Customer site | ✓ |  | ✓ | ✓ |  | ✓ |

Indicate with a þ when audit of this function planned or when a visit is planned.

When producing this plan ensure that all clauses of the standard(s) can be attributed to Area/Function/Process/Activity/Site Visits (temporary sites) and are audited over the 3-year Recertification Cycle.

The clients Locations/Branch Offices must also be appropriately sampled over the 3 Year Certification Cycle.

|  |  |  |  |
| --- | --- | --- | --- |
| Plan Produced By | Graham Oatley | Date | 26/04/23 |

|  |  |  |  |
| --- | --- | --- | --- |
| Plan Amended By |  | Date |  |