**MANAGEMENT SYSTEM AUDIT REPORT**

**Executive Summary**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| |  |  | | --- | --- | | **Company Name:** | A1 Group | | **Legal Status:** | **Limited** | | **Certification Number:** | 7366 | | **Head Office Address:** | Silver Birches  Highland Avenue  Wokingham  Berkshire  RG41 4SP  United Kingdom | | **Telephone:** | 0118 989 4652 | | **Type of Audit:** | Surveillance Visit 2 | | **Visit Number:** | 2 | | **Date of Audit:** | April 22nd 2022 | | **Audit Team Leader:** | Paul Grainger | | **Audit Team Member(s):** | Wendy Insull (SSiP) | | **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 to be appropriate | | **Main client representative:** | Mr Clive Owen | | **Telephone:** | 0118 989 4652 | | **E-mail:** | clive@a1groupuk.com | | **Consultant representative if used:** | HR & Business Solutions and JR Consulting Ltd | | | | | |  |
| **Staff FT:** | 150 | **Staff PT:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Start Time:** | 0930 | **Finish Time:** | 1630 |
|  |  |  |  |
| **Number of days onsite:** |  | **Number of days remote:** | 2 |

|  |  |
| --- | --- |
| **Total Hours:** | 15 |

|  |  |
| --- | --- |
| **Justification (if less than 8 hours):** | 2 hours preparation and report writing |

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

**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)**

A good audit and the business show the use of good working practices and good housekeeping. The back office works very well and makes it easy to retrieve documented information. All staff showed great awareness and were helpful throughout the audit.

During the audit 2 minor non-conformances were raised and no observation were raised during the audit.

1. **Findings**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Total Number of Non-conformances** |  | **Major** |  | **Minor** | **2** | **N/A** |  |

| **NCR Nº** | **Details of Non-conformances Raised** | **Standard/**  **Clause Nº** | **Major/**  **Minor** | **Completion**  **Date** |
| --- | --- | --- | --- | --- |
| **1.** | The business needs to review their objectives for their integrated management system for 2022 (Delayed due to Covid) | ISO9001/14001 & 45001 Clause 6.2 | Minor | Next Visit |
| **2.** | The business needs to conduct a management review before the next audit in October. (Delayed due to Covid) | ISO9001/14001 & 45001 Clause 9.3 | Minor | Next Visit |
| **3.** |  |  |  |  |
| **4.** |  |  |  |  |
|  |  |  |  |  |

**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 | 22/04/22 |

**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)**

N/A

1. **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**

**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 | Group Director |
| Ian Wilson | JR Consultant |
| Sean Whittle | HR Consultant |
| Paul Grainger | Lead Auditor |
| Wendy Insull | Lead Auditor |

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

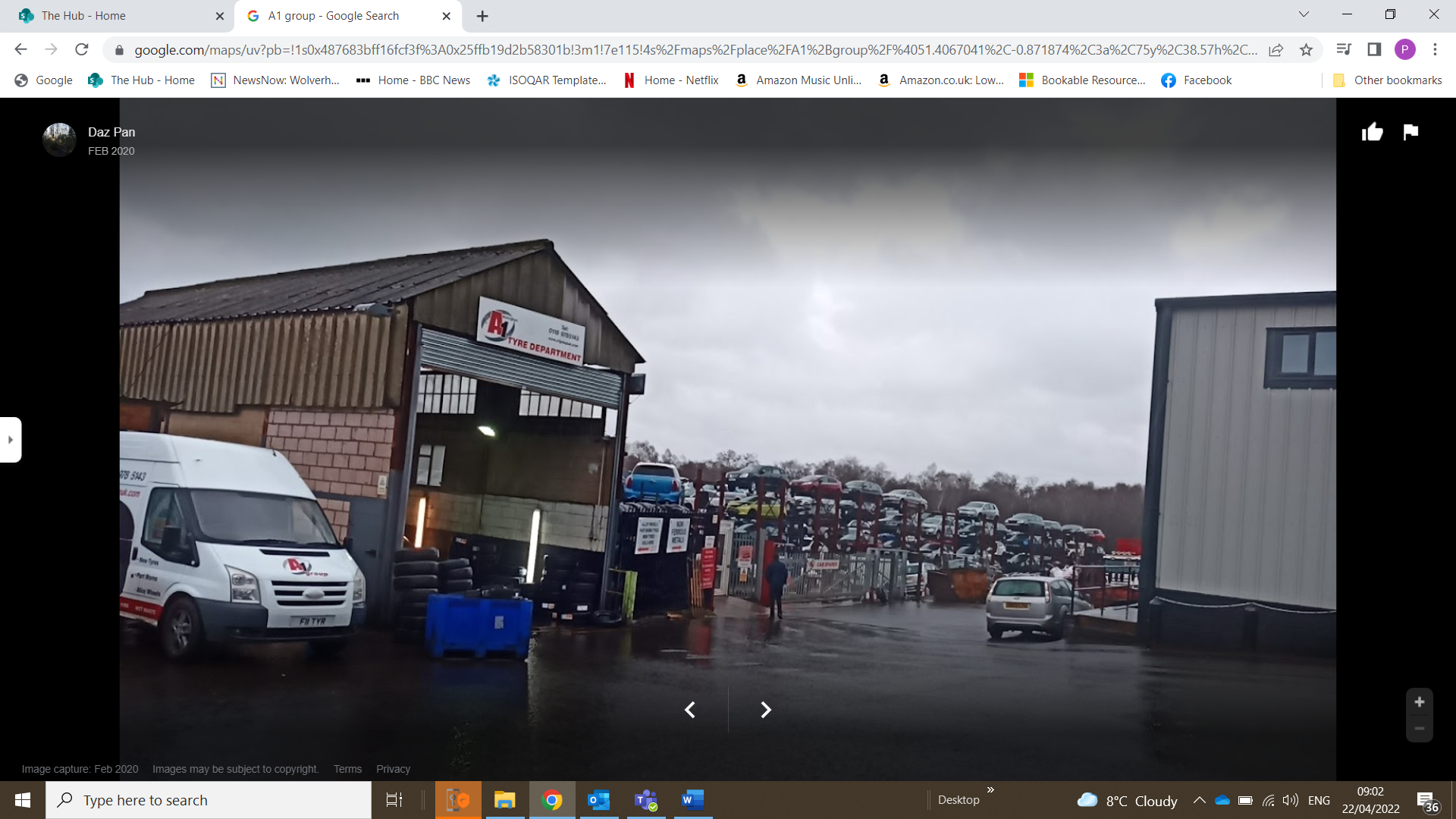
Have previously raised Improvement Requests/Non-Conformances been effectively closed out? YES  NO

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 need to ensure that the corrective action log remains up to date and corrective actions are closed out in a timely and effective manner. | Actions now closed out on log dated April 2022. Copy viewed by the auditor | Closed |
| 2. |  |  |  |

**Site Walk**



The site walk notes are based on the previous onsite visits, the Organisation is based on an industrial site in Wokingham Berkshire, within a gated and fenced compound which is covered by CCTV and guarded 24/7. A large car park which is situated to the front. of the reception area. When arriving at the site visitors are stopped and must report to the main reception, visitors are then directed to the relevant departments. The main office is situated within a two-floor building which is very modern and clean, the ground floor containing administrative staff and main reception, with a large staff kitchen and toilets which provides good staff welfare. The First-floor houses management staff with offices, customer meeting rooms and a large boardroom. The building is well spaced out and contains plenty of natural lighting and emergency lighting in the event of an emergency. On the site walk of the yard it was noted that a large amount signage was visible from instruction on PPE, Hazard warnings, First Aid point of contacts, fire points, multiple first aid Kits which are in good order and had an expiry date of 2024.The Fire extinguishers were present in large numbers across the site. Starting out from the reception area was a clearly marked walkway which lead to the main car storage and display area where visitors can inspect the cars and parts before purchasing, visitors are required to wear High Vis vest and enter the area at their own Risk. The cars are stored on large industrial Racking which is 4 levels high and well-spaced out to allow access to the viewing public and staff. The site is laid out very neat and tidy considering the nature of the business. Staff are required to were Hard Hats, Hi-Vis Vests and Protective Footwear throughout the site. To the side of the storage area again following a walkway is the breakers Yard which also has a decontamination area for removal of unused fuels, Liquids and oils. Before entering the Breakers, yard there is a PPE station with available PPE for staff and visitors which all personnel are required wear went entering this area. other notable areas in the site were:

* Health and safety Notice Board
* Defibrator located outside the Kitchen on the ground floor of the office building
* Tyre storage area
* Reception office to the Car yard
* A small Decontamination area within the car yard storage site
* 50-60 large sets of shelving for storage of cars and parts
* Spill kits
* Fire extinguishers present on every unit of shelving
* First Aid kits in every area of work
* A large metal sorting Machine within the breakers yard
* A Fire evacuation gathering point

The site was very tidy considering the nature and scale of the operations it was obvious it was very well managed.

The whole site is built on concrete and the drainage is a sealed system to ensure contamination is captured in run off. There is a large interceptor tank at the bottom of the site and this is emptied out on a regular basis by the waste carriers. There are also holding tanks further up the site to help manage the control to the interceptor. Spill kits were observed at various locations throughout the site.

The site is swept clean on a daily basis to ensure good housekeeping is maintained, when sections of concrete flooring start to break down they are repaired. The site by nature is a scrap yard and as such this was taken into account when conducting the audit.

**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**

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

**Detail and evidence:**

Not covered during this audit plan

**Summarise Conformity with Requirements:**

**N/A**

1. **Leadership**

**Detail and evidence:**

**Top Management Interview (PG)**

Interviews and discussions held with: CO – General Manager, SC: Consultant and SW: HR Consultant

Top management are able to demonstrate commitment and organisation regarding the implementation of QMS/EMS/OH&S processes promoting continual improvement and the roles and responsibilities.

After these discussions, it was evident that top management were committed to the continual improvement of the IMS and planned to take an active role in driving the system forward. Constructive answers were given to confirm that Directors, other members of top management and all staff members had provided an active input to the review, identification and control of business context, risks, opportunities and quality/environmental objective setting. Clear communication channels had been established throughout the organisation, which confirmed that staff had been made aware of IMS processes and requirements.

It was evident that the strategic direction, company image, opportunities for the business and a full commitment to the continual improvement of the IMS had been considered as part of the implementation of the updated system and identification of internal/external interested parties. Top management will continue to play a key role in the monitoring, measurement and improvement of the system and will support other management/staff roles to demonstrate their leadership as it applies to their areas of responsibility. Other areas discussed include the newly setup A1 Transport division which they are hoping to bring into scope later this year. This is based in South Wales.

**Quality Policy (PG)**

Quality policy in place – (V1) signed and approved by the Company’s Managing Director – RP on (01/01/2022). The policy was evidenced to meet requirements of ISO 9001:2015. The Quality Policy was viewed, which was:

• Appropriate to the purpose and context of the organisation and supported its strategic direction

• Provided a framework for setting quality objectives

• Included a commitment to satisfy applicable requirements

• Included a commitment to continual improvement of the quality management system.

**OH&S Policy (PG)**

Top management had established an OH&S policy that included a commitment to provide safe and healthy working conditions for the prevention of work related injury and ill health and is appropriate to the purpose, size and context of the organisation and was specific to the nature of its OH&S risks and OH&S opportunities. The OH&S Policy also:

* • provided a framework for setting OH&S objectives
* • included a commitment to fulfil legal and other requirements
* • included a commitment to eliminate hazards and reduce OH&S risks
* • included a commitment to continual improvement of the OH&S management system
* • included a commitment to consultation and participation of workers

The Policy had been reviewed and approved by top management (approved and signed by the Managing Director – RP, on 01/01/2022) was available as documented information and had been communicated within the organisation (displayed on H&S noticeboards/available to internal interested parties on the Organisation website). Other OH&S related policies were evidenced as follows:

* Parental Bereavement leave policy
* Drugs and Alcohol Policy
* Modern Slavery Policy
* Work Safe Policy
* Equality and Diversity Policy
* Road risk policy
* Whistleblowing Policy
* Covid 19 Policy
* Work life balance/ flexible working

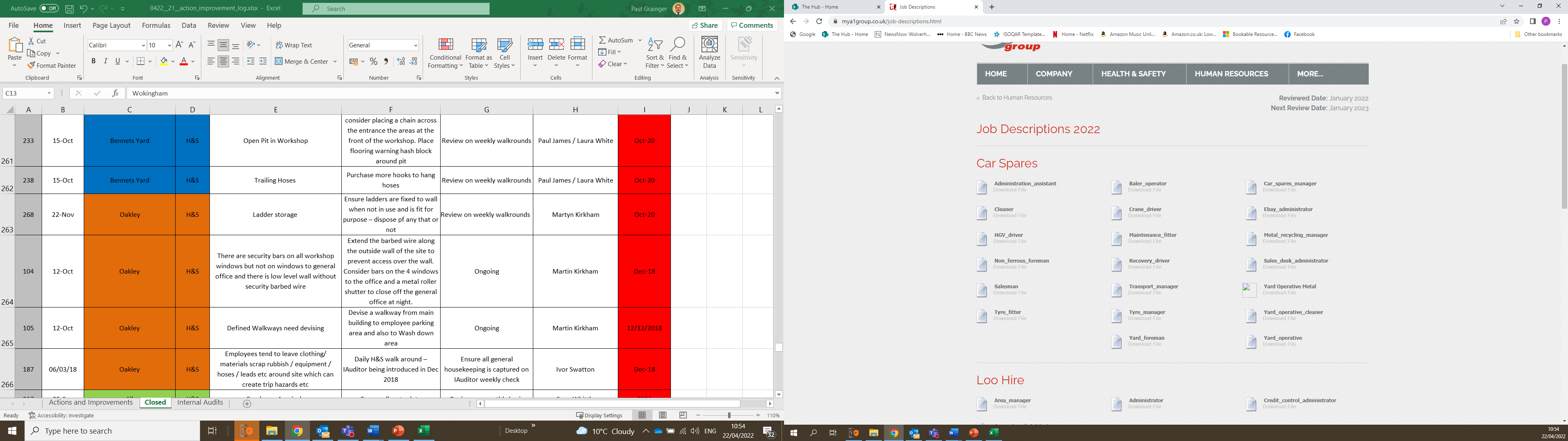
**Environmental Policy (PG)**

It was evident that organisation had documented and established an Environmental Policy (V2 which was in line with the requirements of 5.2.1 of the 2015 standard. This policy was available as documented information. The Environmental Policy was viewed, which was:

appropriate to the purpose and context of the organisation, including the nature, scale and environmental impacts of its activities, products and services

* Provided a framework for setting environmental objectives
* Included a commitment to the protection of the environment, including prevention of pollution and other specific commitments relevant to the context of the organisation

The policy was last reviewed, approved and signed by the top management on the 01/01/22 before release/circulation within the organisation and was available the organisation website (read only). The policy was also displayed on noticeboards on the premises and had been communicated to staff members upon update to the 2015 standard requirements/induction processes.



**Roles and Responsibilities (PG)**

The company has defined roles and responsibilities, including those for the Integrated management system. These are included in the organisational roles and responsibilities under the job description tab on the ‘back office’ local intranet, which was at January 2021 review level, Next Review Date January 2022). A sample of the job descriptions were reviewed during this remote visit including;

Car Spares

Administrator

Cleaner

HGV Driver

Loo Hire

Administrator

Area Manager

Wet Waste

Administration Assistant

Senior Administrator

The is also an Org Chart in place, which is also available on the intranet (back office)

**Consultation and participation of workers: (PG)**

Detailed within OP5 Communication and Consultation procedure and the H&S Framework and Consultation document, which outlines the requirement. This is supported by the following meetings and ongoing communications within the business;

* **Health and Safety Refresher Update** – conducted on the 21/04/22 – The agenda included *- H&S Legal Requirements, Health & Safety Intro, Manual Handling, Transportation, H&S Legal Requirements, Use of Mobiles / Drinking / Drugs, COVID 19, Fire Evacuation, Housekeeping / Site Rules - including PPE, Slips & Trips - Accidents - Reporting, RIDDOR, First Aid, Near misses and Risk Assessments & Method Statements*
* **A1 Newsletter published in November 2021**- Included – Fleet Updates, New work innovations FORS Practitioner Awards and Health & Safety Update
* **Health & Safety Meetings** – Minutes viewed for December 2021 – included – Accidents, Incidents & Near Misses, Performance Metrics, Operational Changes, Risk Assessments, Management Programs, Legal Compliance, Third Party Performance, HSE Updates, Operational Issues, Health and Safety Training

The organisations managers and supervisors are required to arrange when necessary, meetings for employees and any sub-contractors to inform them of:

* Ongoing system performance
* Any items of special interest
* specific achievements
* Any problems that have been encountered with the Management System

This is done so using memos, staff meetings, notices and through toolbox talks translated into differing languages where required. Where toolbox talks are held a record of the talk will be maintained. The organisation ensure that employees are consulted on all matters required eg. new equipment, technology, PPE etc. All employees are also encouraged to share any concerns or raise any H&S queries to their direct line manager and actions will be taken as appropriate.

**Summarise Conformity with Requirements:**

The organisation has demonstrated conformity with clause 5 of the standards as per the evidenced above.

1. **Planning for the Management System**

**Detail and evidence:**

**Risk and Opportunities (PG)**

The business has a documented Business Risk Register in place (Last reviewed in February 2022) The business risk register is also reviewed at the management review meeting. This identifies the risks and opportunities under the following defined levels;

* **VH - Extreme Level of Risk** - Not Acceptable - Immediate action required; Likely to threaten the survival of persons and or property. Must be managed by senior management.
* **H - Substantial Level of Risk** - Generally, Not Acceptable - Activities should cease until further control measures to mitigate the risk are introduced. Management attention needed.
* **M - Tolerable Level of Risk** - Generally Acceptable - Unlikely to cause much damage and/or threaten the person/activity; Manage by specific control measures, monitoring and procedures.
* **L - Low Level of Risk** - Acceptable - Unlikely to require specific risk management; Manage by routine control measures and procedures; Review periodically.
* **VL - Negligible Level of Risk** - Completely Acceptable - Doesn’t require specific risk management.

Items on the register have been identified as either a low or medium risk on the register. The Business Risk Register is reviewed on a regular basis by the Senior Management and the following risks and opportunities were viewed in the register by the auditor;

* Operations
* Infrastructure and Resource
* Services and activities
* Health and Safety
* Environmental
* Opportunities

The risk register is broken down into defined areas. These include Operational Risks, Infrastructure and Resource, Service and Activities, Health and Safety, Environmental and Opportunities. The following compliance and environmental risks were sampled from the register;

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **RISK** | **Initial Risk** | **CONTROL MEASURES** | **Residual Risk** | **MONITORING** |
| Compliance Risk | Lack of trained support to manage and enforce business Compliance | The A1 Group has an automated training system and all necessary training for employees is sourced prior to expiry and all employees hold the necessary training certification to ensure business compliance in all of its divisions | M | The General Manager is responsible for ensuring the business uses external suppliers to ensure it remains compliance at all times |
| Compliance Risk | Failure to adhere and comply to new legislation in advance | The A1 Group regularly discuss legalisation changes i.e. DVSA, Environmental and H&S at its monthly H&S meeting and any requirements are considered, costed and where necessary implemented in advance of the legal deadlines | M | 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 and implement any changes required |
| Compliance Risk | Lack of trained employees to create culture of compliance | The A1 Group has an automated training system and all necessary training for employees is sourced prior to expiry and all employees hold the necessary training certification to ensure business compliance in all of its divisions | M | The Office Manager in conjunction with the Divisional Managers are responsible for ensuring the business remains complainant at all times and has enough trained employees to fulfil its client’s requirements |
| Compliance Risk | Lack of analytics in place to monitor compliance | The A1 Group use a number of external bodies to review its operations i.e. Alcumus to ensure its compliant at all times. Any corrective actions identified are implemented immediately and in advance of a secondary audit. The Group have a business improvement log, and this is reviewed by the Management to ensure all actions required are dealt with the required timescales | M | The Office Manager in conjunction with the General Manager, Divisional Managers, HR Consultant, H&S Advisor, Transport Manager and various external suppliers are responsible for ensuring the business remains complainant at all times |
| Compliance Risk | Fire Prevention Plan | The A1 Group has re written its Fire Prevention plan for the Wokingham site following an audit by the Environment Agency in July 20. This is currently being reviewed and due for submission on the 11/1if this is not approved then it is possible until we comply with fire regulations for the site, we may be restricted in our operations | H | Ensure that the 8 correct actions are rectified and that the plan is approved |
| Spillages | Damage to the Environment | The A1 Group have a robust spillage procedure and all employees are trained in its use | L | All Environmental issues are discussed at the Monthly H&S meeting and corrective actions implemented. An annual Environmental Audit is conducted by an external supplier and a report and action plan are produced. |
| Fire | Loss of Site | The A1 Group have a robust Fire Evacuation procedure and all employees are trained in its use and regular site evacuations take place to ensure compliance. All Fire Alarms are tested on a weekly basis. All sites have fully trained fire Marshalls and Fire Officers and at the main site in Wokingham there are 8 employees who have been fully trained in deal with fires and also have the use of a fully operational Fire Engine. All sites have an annual Fire Risk Assessment carried out by the H&S Advisor and all firefighting equipment is fully maintained and serviced on an annual basis. Fire Evacuation procedures are part of the Employee induction and Fire Evacuation procedure training also takes place annually and is recorded. Fire Evacuation Procedures are on all staff notice boards and the back office. A Fire Prevention plan is also in place to prevent Fires occurring | M | All Environmental issues are discussed at the Monthly H&S meeting and corrective actions implemented. An annual Fire Risk Audit is conducted by an external supplier and a report and action plan are produced. |
| Noise | Damage to employee hearing and poor relations in local community | The A1 Group conduct annual Noise assessments. Any noise complaints are addressed immediately and where necessary the Group with work with the local Environmental officer to rectify the issue | M | All Environmental issues are discussed at the Monthly H&S meeting and corrective actions implemented. An annual Environmental Audit is conducted by an external supplier and a report and action plan are produced. |

**Objectives and Targets - QMS, EMS & OHSMS (PG)**

Objectives and Target are in place and these are reviewed annually through the organisations Management Review meetings to ensure they continue to remain / applicable. The Objectives and Targets are available to all staffs and interested parties on the organisation website/intranet. The objectives for this year are yet to be set and this will be done at the management review meeting planned for June 2022. Previous objectives from before covid included the following which are now complete

* Maintain existing client base across - (Loo Hire, Wet Waste and Scrap)
* Maintain current accident statistics
* Completion of IOSH Managing Safely Courses for Management
* Continued recycling of scrap and waste products
* Continued replacement of the fleet in line with CO2 emissions
* Implementation of retractable barriers on the car spare racks to stop access to these areas where the forklift truck is in operation
* Implement SAGE HR
* Roll out QMS to all sites
* Improve communication of the findings and learnings from the yard inspections to employee

**NC01** – The business need to review their objectives for their integrated management system for 2022

**Aspects & Impacts (PG)**

A detailed Aspect Assessment register is in place (Detailed in Procedure 02) the following considerations are: Waste, Office and Yard, Yard Activities, Travel / Transport, Abnormal and Local Areas, with each activity linked with respect to: Emissions to air, Release to water, Release to land, Use of natural resources, Use of energy, Energy emitted, Waste by product and Physical attributes. Aspects are then assessed by way of a scoring system severity, amount, quantity, frequency, overall significance. This register was last updated in September 2020 (and there have been no further changes to date). Impacts include Emissions to Air, Releases to Water, Use of Natural Resources etc…

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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| **Environmental Management System - Aspect Assessment** | | | | | |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Process/Activity** | **Emissions to Air** | **Releases to Water** | **Releases to Land** | **Use of Natural Resources** | **Use of Energy** | **Energy Emitted -vibration, heat, Radiation** | **Waste and By-products** | **Physical Attributes** | **Severity** | **Quantity** | **Frequency** | **Overall Significancy** | **Control Measures and Life Cycle** |
| - General Waste |  |  |  | √ |  |  | √ | √ | 4 | 2 | 5 | 40 | General waste is placed into the general skip and removed for disposal |
| - Tyres |  | √ |  | √ |  |  | √ | √ | 4 | 3 | 5 | 60 | Tyres are removed from use - with tyres that are re-usable these are sold on to the general public through the tyre shed |
| - Ferrous Metal |  |  |  |  |  |  | √ | √ | 4 | 3 | 5 | 60 | Metals are segregated and recycled into ferrous and non-ferrous metals. |
| - Liquids e.g. fluids, coolants etc. |  | √ |  |  |  |  | √ | √ | 4 | 3 | 5 | 60 | Liquids and coolants are removed from vehicles and stored for disposal |
| - Engines |  |  |  |  |  |  | √ | √ | 4 | 3 | 5 | 60 | Engines are removed from vehicles and recycled where they can be. Scrap yard is also operational so vehicles that can be used for spare parts are stored. |
| - Water supply |  |  |  | √ |  |  |  |  | 4 | 2 | 5 | 40 | Water supply is minimal - we are on an interceptor, so any spillages are well contained. |
| - Storage of Vehicles |  | √ |  |  |  |  |  | √ | 4 | 3 | 5 | 60 | All vehicles are de-polluted before being scrapped or placed into the scrap yard. |
| - Light commercial vehicles | √ |  |  | √ |  | √ |  |  | 4 | 3 | 5 | 60 | Vehicles are maintained as required - according to time limits, vehicle size and legislation requirements. New Vehicles are selected based on requirements e.g. emissions as necessary |
| - Large goods vehicles | √ |  |  | √ |  | √ |  |  | 4 | 3 | 5 | 60 |

**Hazard identification - Risk assessments (PG)**

Risk assessments are stored on the back-office system along with the risk assessment process flowchart and RA templates. In total there are over 100 risk assessment on the system. The RA’s were sampled and include;

* Use of Portable Grinders – Dated 01/01/22 – Conducted by SW
* Climbing Ladders - Dated 01/01/22 – Conducted by SW
* Confined Space Working – 01/01/22 – Conducted by SW
* Forklift Truck Operations – 01/01/22 - Conducted by SW
* Driving to Site – 01/01/22 - Conducted by SW

The Office Risk assessment was reviewed hazards included: Slips and Trips, Manual Handling, Electricity, Fire, Working at Height, Electricity, Hand Tools, Power Tools and Ladder Use.

The Company have carried out a Fire Plan and Risk assessment FP002 - this includes: Fire safety systems within the premises, Plan drawing, Fire hazards, Fire safety, signs & notices, Fire warning system, Emergency lighting system, Firefighting equipment, Maintenance management, Alerting the fire Service, Emergency action plan (EAP), Training and the Fire Safety Management plan.

**Summarise Conformity with Requirements:**

Meets the requirements of the standards

1. **Support**

**Detail and evidence:**

**Competence, Awareness and Training (PG)**

Detailed in the Training and Competency procedure OP04. Training records are held on Sage 50 system and are managed by the HR department. All new starters/induction processes include but not limited to the following: Induction video, H&S, PPE, Absence, Smoking Policy, Alcohol and Drugs Policy, Fire Evacuation, Health & Safety notice boards, Fire Assembly Points, First Aid Arrangements, Incident Reporting, Annual Performance Reviews, Back Office Document System (Management Systems Awareness), Slips, Trips and Falls, Working at Height, Manual Handling, Spillages, Sharps and Defibrillator usage.

The Training record element considerations sighted on Sage include CSCS, Induction, HGV, PPE, Manual Handling and Confined Spaces is recorded on here.

**H&S Refresher Training**

Completed by HR & Business Solutions Ltd – Trainer SW on the 21st April 2022

Agenda included –

* + Workplace Safety - everyone's responsibility
  + Legislation - 1974 H&S Act
  + Induction - basic understanding of H&S
  + COSHH - read label for instruction/ directions etc
  + Workplace signage - make sure in place and obey them
  + Driving Safely - vehicle checks
  + Fire Safety - get out / stay out / Fire training
  + Manual Handling - watch your back
  + PPE - wear it / look after it
  + Slips Trips and Falls - major contributory for accidents i.e. liquids
  + H&S Training - reduce accidents
  + Good housekeeping - familiar with workplace ie fire exits etc

Signed sheets (07/06/21) were viewed for all wet waste staff and Car Spares (16/03/21) the training was done in small groups lasting approx.45 minutes

**Spillage Training**

Additional toolbox talk training was also viewed for Spillage Awareness, this was completed in March 2020 and signatures were viewed on the sign off sheet – HC, JH, DD, JG, AW, JP, TH, MK and GP

Other recent training record reviewed included;

* JH – City & Guilds – HSS Training for Confined Spaces – Dated 30/03/22 – Cert No. 5503092394/290
* LD – City & Guilds – HSS Training for Confined Spaces – Dated 30/03/22 – Cert No. 5503092394/340
* JP – Materials Rehandler Refresher with BAM Construction – Dated 07/01/22- Reg No. MD2497
* AW – Materials Rehandler Refresher with BAM Construction – Dated 07/01/22- Reg No. MD2496
* JC – Materials Rehandler Refresher with BAM Construction – Dated 07/01/22- Reg No. MD2495
* CK – Materials Rehandler Refresher with BAM Construction – Dated 07/01/22- Reg No. MD2494
* PR – Materials Rehandler Refresher with BAM Construction – Dated 07/01/22- Reg No. MD2493
* JP – Materials Rehandler Refresher with BAM Construction – Dated 07/01/22- Reg No. MD2492

**Communication (PG)**

Internal and External communication defined in the organisation Communication and Participation procedure –

OP 005 – Communication and Consultation. Sampled extracted from the procedures Internal communications were defined as:

* Signs and notices throughout the workplace
* Emails and bulletins issued to staff. Eg. accident investigation results, annual policy issue etc.
* The use of our ‘Back office’
* Toolbox Talks
* One to One Meetings

**Control of Documented Information (PG)**

All key documents, procedures and forms are version controlled with appropriate measures to control distribution, access and security. Review and authorisation arrangements are in place to deal with changes and amendments. The Systems Manual (SM1) Issue 03. Last Reviewed - Mar 2021. During the audit there appeared to be no conflict with the procedures regarding issue numbers.

A sufficient sample of a variety of documents and records demonstrated effective controls were in place. Paper documents are retained in suitable files and folders. All of which were readily available and accessible in all areas audited. Electronic records are retained on the Server with arrangements for security and back up in place. Daily off-site backups are in place.

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

The organisation has demonstrated conformity with clause 6 of the standards as per the evidence above

1. **Operation**

**Detail and evidence:**

**Site Permits**

Discharge consent – NPSWQD007128 – Environmental Agency

Metal Recycling Site Disposal Licence – WML83313

Notice of Variation Application Permit No. EPR/FP3390EU/V004

**Loo Hire – Work Planning and Operational Activities: (PG)**

The organisation has an electronic work planning and tracking system called ‘The big change’ the new system has been live for a while now. The new system tracks the driver’s vehicle movements, sign off after each service is completed and deals with the waste transfer notes which it emails directly to the customer upon completion. New sales enquiries are dealt with through Inspire system which also manages all new contracts, accounting and the sales order generation which includes the creation of the delivery and despatch notes. The accounts mainly fall into two types of customer – Account Customers (Multiple toilets on sites) and Cash Customers (Single use toilets e.g. Building Site etc) The company’s main business is conducted through the spring and summer months when big events are on. Big clients include Cabin Hire and Plant Hire companies.

The following job packs were seen and reviewed at the time of the audit:

**Delivery Note: 394446**

* Their Ref No: 00000547/51081
* Ordered By: Carla
* Contract No: WOK/334937
* Delivery to: 5 Liverpool Terrace Worthing, West Sussex BN11 1TA
* Dated: 21/04/22
* Requirement: 1 x single site toilet

Hire Contract containing the above details.

**Purchase Order from local Toilet Hire**

* Order No: 000030547/51081
* Order Date: 19/04/2022
* Requirement: 1 x single site toilet for 1 week

***Still out on hire***

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**Example of a Service Job –** *(Customers own Toilets)*

* Their Ref No: WOK/333493/220203/S
* Ordered By: Donna
* Order No: 4501007635
* Service Address: Cityaxis, Kew works depot, Richmond TW9 3AG
* Dated: 03/02/22
* Requirement: 1 x single site toilet

Hire Contract containing the above details.

**Purchase Order from local Toilet Hire**

* Order No: 000030547/51081
* Order Date: 19/04/2022
* Requirement: Service customers own groundhog

**A1 Group – Universal Waste Note**

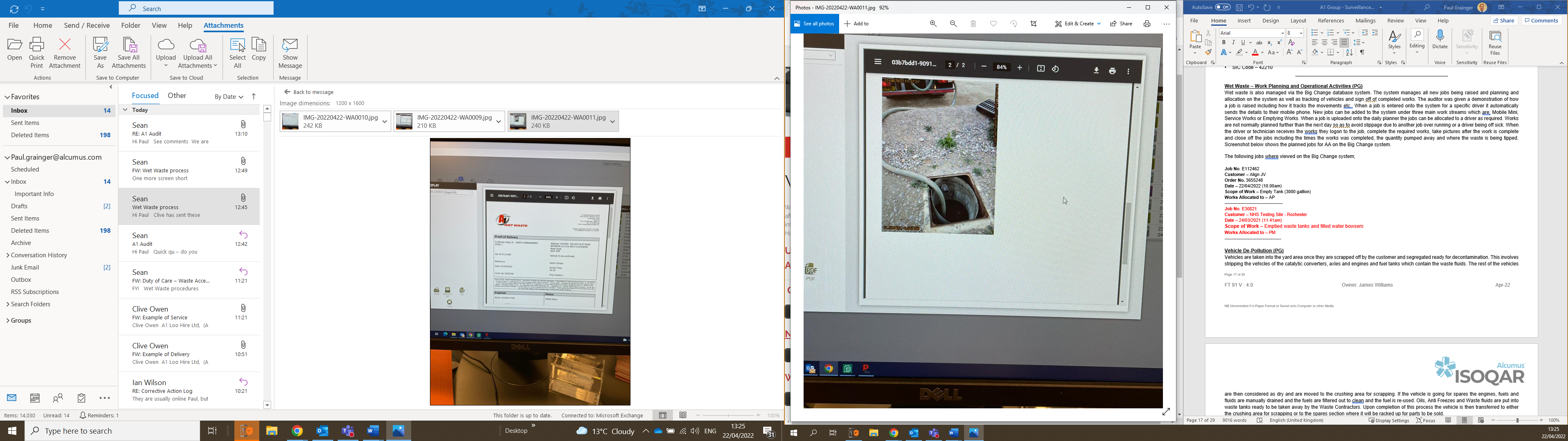
* Description of Waste: Chemical Toilet
* Quantity Removed (gallons) 1000 gallons
* EWC: 20.03.04
* SIC Code – 42210

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Wet Waste – Work Planning and Operational Activities (PG)**

Wet waste is also managed via the Big Change database system. The system manages all new jobs being raised and planning and allocation on the system as well as tracking of vehicles and sign off of completed works. The auditor was given a demonstration of how a job is raised including how it tracks the movements etc.. When a job is entered onto the system for a specific driver it automatically sends the details to their mobile phone. New jobs can be added to the system under three main work streams which are; Mobile Mini, Service Works or Emptying Works. When a job is uploaded onto the daily planner the jobs can be allocated to a driver as required. Works are not normally planned further than the next day so as to avoid slippage due to another job over running or a driver being off sick. When the driver or technician receives the works they logon to the job, complete the required works, take pictures after the work is complete and close off the jobs including the times the works was completed, the quantity pumped away and where the waste is being tipped. Screenshot below shows the planned jobs for AA on the Big Change system.

The following jobs where viewed on the Big Change system;



**Job No**. E112462

**Customer** – Align JV

**Order No.** 3655248

**Date** – 22/04/2022 (10.00am)

**Scope of Work** – Empty Tank (3000 galllon)

**Works Allocated to** – AP

**----------------------------------------**

**Job No**. E30821

**Customer** – NHS Testing Site - Rochester

**Date** – 24/03/2021 (11.41am)

**Scope of Work** – Emptied waste tanks and filled water bowsers

**Works Allocated to** – PM

---------------------------------------

**Vehicle De-Pollution (PG)**

Vehicles are taken into the yard area once they are scrapped off by the customer and segregated ready for decontamination. This involves stripping the vehicles of the catalytic converters, axles and engines and fuel tanks which contain the waste fluids. The rest of the vehicles are then considered as dry and are moved to the crushing area for scrapping. If the vehicle is going for spares the engines, fuels and fluids are manually drained and the fuels are filtered out to clean and the fuel is re-used. Oils, Anti Freezes and Waste fluids are put into waste tanks ready to be taken away by the Waste Contractors. Upon completion of this process the vehicle is then transferred to either the crushing area for scrapping or to the spares section where it will be racked up for parts to be sold.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Emergency Preparedness and Response (PG)**

The organisation has a procedure in place for Fire, first aid, spillage and other emergency situations, OP9, Issue 1. The following areas were reviewed during the audit;

* Fire Prevention Plan Version 4 – Date January 2021 Plan includes – Purpose, Combustible materials on site, Non-Combustible materials on site, Activities at Site. Managing the common causes of fires, Prevent Self Combustion, Prevent fire Spreading, Appendices, Additional Environmental Considerations, A1 Group Fire Emergency Evacuation Procedure, A1 Group Fire Evacuation strategy, A1 Group Emergency Action Plan
* Fire Alarm System service completed by Berridge Electrical Services Ltd – Report No. 22067150
* First Aid kits were all found to be in order across the site.
* First Aid Trained - Wokingham Car Spares - RP and TH
* Spill kits were also in place at various locations  
  Fire Extinguishers are serviced annually by RES Fire Protection – Last done on in February 2022.
* Fire Risk Assessment was viewed dated January 2022. Approved by Sean Whittle, FCIPD H&S Consultants.
* Fire Marshalls and First Aiders are designated for the sites.
* Last emergency evacuation took place on the December 2021
* Alarmed Interceptor at the bottom of the site.
* Fire Alarm weekly checks conducted (04/03/22)
* PAT Testing last conducted in August by Berridge Electrical
* Evacuation routes – All evacuation routes were clear
* Fire prevention plan - Available dated July 2015, Version 1. Plan displayed in the main office
* Drainage Plans are also in place

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

Meets the requirements of the standards

1. **Performance Evaluation**

**Detail and evidence:**

**Customer Satisfaction: (PG)**

The organisation had continued to gain opportunities from existing clients and relationships. Repeat Business, referrals, verbal feedback, Meetings, Reviews posted on Facebook and Google and Operatives carrying out task on site. As per the management review of IMS objectives/management review minutes, it was evident that this information had been used as an input to the process, in order to assess company performance, client satisfaction levels and any areas for improvement if necessary. The following snapshot was taken from Google Reviews (Scoring 4.4 out of 5)

* **JD –** 4 months Ago– (5 Stars) -Excellent service. Well done to the tyre department, sorry I've forgotten your name. Well done to the team who helped me out with weigh-in my alloy wheels and car batteries. This then paid for my two front tyres that needed to be replaced. Couldn't recommend them enough.
* **CD** – 2 Months Ago – (5 Stars) - They have a lot of things car need and that ok. The prices are affordable for everyone pocket. Recommended.
* **AF -** 5 Months Ago – (5 Stars) - First class service as always. Great team in the tyre bay and so helpful.

**Management Review** **QMS, EMS & OHSMS: (PG)**

The last management review meeting was conducted on the 12/11/2020 Attended by: SP (Director), RP (Director), CO (Director), CD ( Finance Director), RJP (Car Spares, Manager), MP (Wet Waste Director), SC (Transport Manager), SW (HR Consultant), GW (Yard Manager), SM (Coventry and Bridgend / Coventry), Loo Hire, LW (Bennetts), MD (Oxford0, DC (Wet Waste), SW (HR consultant) and CE (Group) and ER (Minutes) the following agenda was seen:

* Actions Outstanding
* Overall System Performance
* Policy Review
* Proposed changes / suggestions
* External Communications
* Resources
* Participation and Consultation
* Training
* Emergency Procedures
* Company Objectives
* Suppliers / rejects
* External / Internal Audits
* Corrective and Preventative actions
* Legal Compliance
* New Developments
* Customer Complaints
* Customer feedback
* Risk assessments / COSHH
* Accidents / Incidents

The 2021 management review was postponed due to Covid. The next management review will take place in June 2022.

**NC02** – The business need to conduct a management review before the next audit in October.

**Evaluation of Compliance: (PG)**

The evaluation of the organisations legal compliance is conducted on an annual basis through the following methods:

* Legal audit completed of the management system by JR Consultants at least once annually.
* Site inspections – reviewed during this audit.
* Annual management review meeting – where company legal compliance is discussed, and a formal statement issued by the Directors to confirm (recorded at the management meeting).

**Summarise Conformity with Requirements:**

Meets the requirements

1. **Improvement**

**Detail and evidence:**

**Not Covered during this Audit**

**Summarise Conformity with Requirements:**

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 | Group Director |
| Ian Wilson | JR Consultant |
| Sean Whittle | HR Consultant |
| Paul Grainger | Lead Auditor |
| Wendy Insull | 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.**

|  |
| --- |
| N/A |

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

|  |  |  |
| --- | --- | --- |
| **Date** | **Location** | **Auditor(s)** |
| 22/04/22 | Head Office | PG & WI |
|  |  |  |

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

|  |  |  |
| --- | --- | --- |
| **Date** | **Location** | **Auditor(s)** |
| N/A |  |  |
|  |  |  |

1. **Locations/Branch Offices**

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

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

|  |  |
| --- | --- |
| **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.** |

|  |  |
| --- | --- |
| **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** |  |

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) | | | |  | | | |
| Standard(s) | | | | ISO 9001:2015, ISO 14001:2015 45001:2018 | | | | | Type of Audit (ie Surveillance) | | Surveillance 3 | | | |
| Audit Dates | | | | TBC | | | | Location(s) | | Head office | | | | |
| Audit Start Time | | | | 0900 | | Does Client need to confirm site visit with ISOQAR Head Office prior to next visit **YES/NO** | | | | | | | No | |
| Audit Language (if not English) | | | | N/A | | Is Recertification Planning Required **YES/NO** | | | | | | | No | |
|  |  | | | |  | | | | | | |  | | |
| TBC | | AM | **Opening Meeting** / 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) | | | | | | | | | | | TBC | |
| Day 1 | | AM | 4.1 Understanding the organisation and its context | | | | | | | | | | |  | |
|  | | AM | 4.2 Understanding the needs and expectations of interested parties | | | | | | | | | | |  | |
|  | | AM | 4.3 Determining the scope of the Quality / Environmental / OHS Management System | | | | | | | | | | |  | |
|  | | AM | 4.4 Quality / Environmental / OHS Management system, its processes and their interactions. | | | | | | | | | | |  | |
|  | | AM | 5.1 Leadership & Commitment (interview with top management); | | | | | | | | | | |  | |
|  | | AM | 5.2 Quality, Environmental and OHS Policies | | | | | | | | | | |  | |
|  | | AM | 5.3 Organisational Roles & Responsibilities | | | | | | | | | | |  | |
|  | | PM | 6.1 IMS Risks & Opportunities (including H&S risks) | | | | | | | | | | |  | |
|  | | PM | 6.3 Planning of Changes) | | | | | | | | | | |  | |
|  | | PM | 6.1.3 Compliance Obligations | | | | | | | | | | |  | |
|  | | PM | 7.1 Resources, Infrastructure – (Lifting equipment maintenance, LOLER, vehicle maintenance, Plant and site maintenance / Equipment maintenance / PUWER) | | | | | | | | | | |  | |
|  | | PM | 7.3 Awareness; | | | | | | | | | | |  | |
|  | | PM | 7.4 Communication; | | | | | | | | | | |  | |
| TBC | | PM | 7.5 Documented Information – creating & updating | | | | | | | | | | | TBC | |
| Day 2 | | PM | Scrap waste process | | | | | | | | | | |  | |
|  | | PM | Procurement/approval of suppliers/contractors | | | | | | | | | | |  | |
|  | | PM | Purchasing | | | | | | | | | | |  | |
|  | | PM | Vehicle de pollution | | | | | | | | | | |  | |
|  | | PM | Accident/Incident/Near miss process | | | | | | | | | | |  | |
|  | | PM | Control of COSHH | | | | | | | | | | |  | |
|  | | PM | Waste Management | | | | | | | | | | |  | |
|  | | PM | 9.1.3 - Analysis and Evaluation | | | | | | | | | | |  | |
|  | | PM | 9.2 - Internal Audit; | | | | | | | | | | |  | |
|  | | PM | 9.3 - Management Review | | | | | | | | | | |  | |
|  | | PM | 9.1.2 Evaluation of Compliance | | | | | | | | | | |  | |
|  | | PM | 10.2 Nonconformity and corrective action | | | | | | | | | | |  | |
|  | | PM | 10.3 Continual Improvement | | | | | | | | | | |  | |
|  | | PM | **Closing Meeting** | | | | | | | | | | |  | |

**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. Cancellation of audit or surveillance dates within 20 working days of the agreed date will result in ISOQAR claiming an extra levy from the company for each staff day cancelled.**

Note to Auditor

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

|  |  |
| --- | --- |
| Organisation Name | A1 Group |

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 1 | Visit 2 | Visit 3 | Visit 4 | Visit 5 | Visit 6 |
| **Month and Year** | Oct 21 | Apr 22 | Oct 22 | Apr 23 | Oct 23 | Mar 24 |
| **Number of Days** | 2 | 2 | 2 | 2 | 2 | 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 |  | ✓ |  | ✓ |  | ✓ |
| 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** | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
| Main Office- Loo Hire; Swallowfield, Berkshire |  |  |  | ✓ |  | ✓ |
| Loo Hire Site Visit |  | ✓ |  |  |  | ✓ |
| Wet Waste Site Visit |  |  |  | ✓ |  | ✓ |

Indicate with a **** 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.

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| --- | --- | --- | --- |
| Plan Produced By | Paul Grainger | Date | 25/03/21 |

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