



Assessment Report

INFRATEC-UK Ltd (InfraTec UK Ltd)

Assessment dates
Assessment Location(s)
Report author
Assessment Standard(s)

In 16/11/2020 to 19
Middlesbrough
Nathan Chivers
ISO 9001:2015

16/11/2020 to 16/11/2020 (Please refer to Appendix for details) Middlesbrough (000)
Nathan Chivers



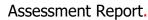




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Executive summary

The organisations management system continues demonstrate effective compliance with the requirements of ISO 9001:2015. Arrangements evidenced as part of the assessment are also effective in ensuring that company objectives are met in line with strategic direction and business planning.

The senior management team continue to demonstrate effective use of the organisations management system to identify; business risks and opportunities, the needs and expectations of clients and interested parties, and statutory obligations associated to the services supplied by the organisation.

Local controls continue to be managed effectively demonstrating the maturity of the organisations operational procedures, with all employees interviewed during this assessment demonstrating a clear understanding of company expectations.

No non-conformances or opportunities for improvement have been identified in this recertification (via strategic review) assessment.

Based upon evidence sampled during this assessment and an assessment of the strategic review pack recertification to ISO 9001:2015 is recommended.

Changes in the organization since last assessment

There is no significant change of the organization structure and key personnel involved in the audited management system.

No change in relation to the audited organization's activities, products or services covered by the scope of certification was identified.

There was no change to the reference or normative documents which is related to the scope of certification.

NCR summary graphs

There have been no NCRs raised.

Your next steps

NCR close out process

There were no outstanding nonconformities to review from previous assessments.

No new nonconformities were identified during the assessment. Enhanced detail relating to the overall assessment findings is contained within subsequent sections of the report.

Please refer to Assessment Conclusion and Recommendation section for the required submission and the defined timeline.





Assessment objective, scope and criteria

The objective of the assessment was to ascertain the integrity of the organization's management system over the current assessment cycle to enable recertification and confirm the forward strategic assessment plan.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2015 and the defined assessment plan provided in terms of locations and areas of the system and organization to be assessed.

ISO 9001:2015

INFRATEC-UK management system documentation

Statutory and regulatory requirements

The primary statutory and regulatory requirements that relate to the services provided by INFRATEC-UK relate to the Construction, Design & Management (CDM) Regulations 2015, where INFRATEC-UK operate as a Contractor. These obligations are subject to internal audit and direct supervision to verify and maintain on-going compliance. Effectiveness of the internal audit process was accessed during this audit.

Assessment participants

1000001110111 participantes						
Name	Position	Opening meeting	Closing meeting	Interviewed(processes)		
Lee Payne	Commercial Manager	Х	X	X		
Lee Ratcliff	Operations Director	Х	X	X		
Dave Bullock	Managing Director	Х	Х	X		



Assessment conclusion

BSI assessment team

Name	Position		
Nathan Chivers	Team Leader		

Assessment conclusion and recommendation

The audit objectives have been achieved and the certificate scope remains appropriate. The audit team concludes based on the results of this audit that the organization does fulfil the standards and audit criteria identified within the audit report and it is deemed that the management system continues to achieve its intended outcomes.

RECOMMENDED - The audited organization can be recommended for recertification to the above listed standards, and has been found in general compliance with the audit criteria as stated in the abovementioned audit plan.

Use of certification documents, mark / logo or report

The use of the BSI certification documents and mark / logo is effectively controlled.

Findings from this assessment **SENIOR MANAGEMENT INTERVIEW:**

Key elements from interview where:

Effectiveness of the Management System: The management system continues to provide a process for ensuring that operational activities are defined and structured to approach to operational process, to promote continual improvement, whilst ensuring client expectations are well understood. The management system also provides a framework for the effective and timely management of non-conformance and managing/mitigating business risk. Overall it is felt that the management system is effective but subject to continual improvement.

Strategic Direction:

The ongoing strategic direction of the organisation is to expand its client footprint and the diversity of the services the organisation can provide. The management system provides and effective platform for managing this in a controlled manner.

Interested Parties: The senior management team have a clear understanding of the Interested Parties associated with the on-going operation of the company and those that related to the strategic direction of the business. And the associated requirements and expectations of those interested parties.

The interview demonstrated that the Senior Management Team has a clear overview of the extent of the Management System (its scope), the strategic risks and opportunities and interested parties.





STRATEGIC MANAGEMENT SYSTEM ACTIVITIES: (Including; Policy, Context of the Organisation (Inc. Interested Parties),

Scope, & Risk & Opportunities)

Evidence Witnessed during Assessment:

- Company Procedures;
 - > QMS001: Quality Manual (Rev. 5: 18/01/19)
 - ~ Section 4: Context of Organisation and Scope
 - ~ Section 5: Quality Policy
- QMP004: Management Responsibility Process (v.2 28/09/20)
- QMD006: Risk Management procedure (Rev. 2: 28/09/20)
- QMD001: Context of the Organisation (Rev. 2: 28/09/20)
- COTO Log (Rev. 2)
 - > Internal/External Issues Overview
 - > Risk & Opportunities Register
 - > Interested Parties Matrix

Organisations method for determining effectiveness:

Review of internal audits, records, key performance indicators (KPI's) & observation

Results:

Policy: The organisation continues to maintain a policy that fulfils the requirement of the standard. The policy was found to be appropriately communicated internal via the noticeboard and externally via the tender submission process.

Context of the Organisation (Inc. Interested Parties): The needs and expectations of interested parties etc. continue to be well defined and subject to regular monitoring etc. as part of the management review process.

Scope: The scope of the management system continues to be well defined within the Quality Manual with the documented scope providing an accurate overview of the activities undertaken by the organisation.

Roles, Responsibilities & Authorities: Roles, responsibilities and authorities continue to be well defined within the Quality Manual and within operational procedures etc.

Risk & Opportunities: Risks and opportunities continue to be well defined and subject to regular monitoring etc. as part of the management review process

Planned objective:

Based on a sampling process and the objective evidence above planned activities & results have been achieved.



CORE MANAGEMENT SYSTEM:

(Including; Objectives, Management Review, Internal Audits, Non-Conformance & Corrective Action, Customer Feedback, Document & Record Management, and Continual Improvement)

Evidence Witnessed during Assessment:

- Company Procedures;
 - > QMS001:QMS Manual (Rev. 5: 18/01/19)
 - ~ Section 5: Quality Policy
 - > QMP002: Resource Management Process (v.2 28/09/20)
 - > QMP003: Measurement Analysis & Improvement Process (v.2 28/09/20)
 - > QMD002: Control of Documents (v.3 28/09/20)
 - > QMD003: Control of Records (v.3 28/09/20)
 - > QMD005: Change Management (v.2 28/9/20)
 - > QMD007: Management Reviews (v.3 17/08/19)
 - > QMD023: Internal Audits (v.3 28/09/20)
 - > QMD024: Corrective & Preventative Actions (v.3 28/09/20)
 - > QMD025: Complaints (v.1 12/04/18)
- 2020 Strategic Company Objectives relating to;
 - > Management Responsibility
 - > Measurement Analysis & Improvement
 - > Resource Management
- Continuous Improvement Log
- 6 Monthly Management Review;
 - > 03/02/20 & 31/07/20
- 2020 Internal Audit Log/Schedule:
 - > Internal Audit # 008: Measure, Analysis & Improvement (07/12/19)
 - > Internal Audit # 009: Management Responsibilities (14/12/19)
 - > Internal Audit # 010: Service Delivery (13/07/20)
- NCR/CAR Register (Internal/External Audit, Complaints, Employee Feedback, etc.)
 - > No internal Non-Conformances
 - > No Supplier Non-Conformances
 - > No Customer/Interested Party Non-Conformances
- Customer Feedback:
 - > Weekly Operation/Planning Review with Client that includes Operational Performance feedback
 - > Trend analysis via Management Review

Organisations method for determining effectiveness:

Review of internal audits, records, key performance indicators (KPI's) & observation

Results:

Objectives: The organisation continues to maintain strategy objectives based upon the three pillars of its management system, with specific activities associated with the objectives records and monitored through the continual improvement log.

Management Review: The organisation continues to undertake a 6 monthly management review. The reviews sampled were found to be well documented with good attendance by the senior management team.





Internal Audits: The organisation continues to utilise a rolling audit plan that was found to cover all areas of the standard and management system. The audits sampled were found to be well documented and were completed in a timely manner with good evidence of auditor impartiality observed.

Non-Conformance Management: Whilst no internal conformances have been identified since the last assessment the organisation continues to maintain a process for management non-conformances to ensure that they are appropriately documented, investigated and resolved in a timely manner. The lack of non-conformances is consistent with the findings from BSI during this certificate cycle.

Customer Feedback (Complaints & Satisfaction): Whilst the organisation has no received any complaints since the last BSI assessment the organisation continues to maintain a process for management of complaints to ensure that they are appropriately documented, investigated and resolved in a timely manner. Other customer feedback (ie. satisfaction) is gathered (where appropriate) through weekly client meetings.

Document & Record Management: Document and record management was found to be well defined and implemented with a records being readily retrievable, and all documents being subject to appropriate revision control.

Continual Improvement: Activities associated with continual improvement were well documented (via the Continual Improvement Register and subject to review as part of the management review process.

Planned objective:

Based on a sampling process and the objective evidence above planned activities & results have been achieved.



Next visit objectives, scope and criteria

The objective of the assessment is to conduct a surveillance assessment and look for positive evidence to verify that elements of the scope of certification and the requirements of the management standard are effectively addressed by the organization's management system; that the system is demonstrating the ability to support the achievement of statutory, regulatory and contractual requirements and the organization's specified objectives as applicable with regard to the scope of the management standard; to confirm the ongoing achievement and applicability of the forward strategic plan.

The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2015 and the defined assessment plan provided in terms of locations and areas of the system and organization to be assessed.

ISO 9001:2015

InfraTec UK management system documentation

Please note that BSI reserves the right to apply a charge equivalent to the full daily rate for cancellation of the visit by the organization within 30 days of an agreed visit date. It is a condition of registration that a deputy management representative be nominated. It is expected that the deputy would stand in should the management representative find themselves unavailable to attend an agreed visit within 30 days of its conduct.

Next visit plan

Date	Auditor	Time	Area/process	Clause
25/11/2021	Ryan Fromson	09:00	Opening Meeting (Review of previous non-conformances & company changes, etc.)	
			CORE MANAGEMENT SYSTEM ACTIVITIES: (Including; Objectives, Management Review, Internal Audits, Customer Satisfaction/Complaints, Non-Conformance & Corrective Action, Document & Record Management, and Continual Improvement)	
			SERVICE DELIVERY ACTIVITIES (Customer Enquiries, Order Processing, ad Purchasing/Sub-Contracting)	
			Lunch	
			SERVICE DELIVERY ACTIVITIES (Customer Enquiries, Order Processing, ad Purchasing/Sub-Contracting) Continued from AM	
		15:00	Report Preparation	
		16:00	Closing Meeting	



Appendix: Your certification structure & ongoing assessment programme

Scope of certification

FS 618313 (ISO 9001:2015)

The planning and management of installation and commissioning services for driver information and traffic monitoring systems.

Assessed location(s)

The audit has been performed at Central Office.

Middlesbrough / FS 618313 (ISO 9001:2015)

Middlesbrough / F5 618313 (150 9001:2015)				
Location reference	0047529484-000			
Address	INFRATEC-UK Ltd Unit 8-9 Easter Park Barton Road Middlesbrough TS2 1RY United Kingdom			
Visit type	Re-certification Audit (SR Opt 1)			
Assessment reference	3088275			
Assessment dates	16/11/2020			
Audit plan (revision date)	22/11/2019			
Deviation from audit plan	No			
Total number of Employees	11			
Effective number of Employees	9			
Scope of activities at the site	Main certificate scope applies.			
Assessment duration	1 day(s)			





Certification assessment programme Certificate number - FS 618313 Location reference - 0047529484-000

Location reference - 004	722707 000	Audit1	Audit2	Audit3	Audit4
Business area/location	Date (mm/yy):	11/20	11/21	11/22	11/23
	Duration (days):	1	1	1	1
STRATEGIC REVIEW	Х			Х	
CONTINUOUS ASSESSMENT		Х	Х		
Opening Meeting (Review of previous non-co changes, etc.)	X	X	X	X	
STRATEGIC MANAGEMENT (Including; Policy, Organisa Interested Parties), Scope, Opportunities)	X			X	
CORE MANAGEMENT SYSTI (Including; Objectives, Man Audits, Customer Satisfaction Conformance & Corrective A Record Management, and Co	Х	Х	Х	X	
INFRASTRUCTURE & WORk Calibration etc.)			Х		
COMPETENCY, AWARENESS			Х		
SERVICE DELIVERY ACTIVITIES (Customer Enquiries, Order Processing, ad Purchasing/Sub-Contracting)			Х		
PROJECT MANAGEMENT and MANGEMENT OF SITE OPERATIONS				Х	
SENIOR MANAGEMENT DIS	X			X	
STRATEGIC REVIEW & 3 YI	X			X	
Impartiality Review		Х			





Mandatory requirements – recertification

The Recertification Review Pack has been reviewed prior to the assessment by the Client Manager.

All requirements of the standard have been implemented.

The entirety of scope / processes has been assessed during the current review period.

The certificate structure and location activities have been reviewed.

Based on the recertification process, the management system continues to demonstrate the ability to support the achievement of statutory, regulatory and contractual requirements.

Complaints received by BSI

There have been no complaints received by BSI during the certification period.

No records of complaints etc recorded with the Strategic Review evidence pack.

Strategic review pack summary

In the current certificate cycle;

- No major non-conformances have been identified.
- No minor non-conformances have been identified.
- No opportunities for improvement have been observed.

Progress in relation to management system objectives.

The senior management team continue to set strategic organisational objectives (including system objectives) in alignment with the strategic direction of the organisation. These continue to be subject to periodic review (and management) via the management review process and other forums such as senior management meetings (as appropriate). Objectives sampled throughout this certificate cycle were found to be generally well managed with no significant concerns identified.

Leadership, commitment and strategy

The senior management team continue to demonstrate effective leadership and commitment to the management system with; good evidence of engagement relating to strategic elements of the management system, including; Policy, Interested Parties, Risks & Opportunities and through the appointment of necessary personnel to maintain and manage the management system on a daily basis. No evidence has been observed throughout this certificate cycle to indicate a strategic failure of leadership & commitment.

Effectiveness of the Management System

Throughout this certificate cycle the management system was found to be well managed and overall effectiveness has been demonstrated. The management system was found to have addressed all areas of the standard and with clear interaction between associated processes. The management system was found to be maintained reflecting internal and/or external changes etc. There have been no significant or major changes that would require an additional stage 1 assessment to be undertaken.





Impartiality review

Impartiality in during the last two certificate cycles have been demonstrated.

- January 2015 (Stage 2): Neil McKinnon
- December 2015 (Continuous Assessment): Helen Field
- December 2016 (Continuous Assessment): Joe Hall
- December 2017 (Strategic Review: Nathan Chivers
- November 2018 (Continuous Assessment): Nathan Chivers
- November 2019 (Continuous Assessment): Nathan Chivers
- November 2020 (Strategic Review): Nathan Chivers
- November 2021 (Continuous Assessment): This will be an impartiality assessment

Continue with the current total assessment days/cycle.

Justified exclusions / non-applicable clauses

Justified exclusions / non-applicable clauses have been confirmed for certificate: FS 618313 details:

- 8.3: Design and development of products and services
- The organisation does not undertake any design activities.

Expected outcomes for accredited certification

What accredited certification to ISO 9001 means

ISO 9001:2015 specifies requirements for a quality management system when an organization: needs to demonstrate its ability to consistently provide products and services that meet customer and applicable statutory and regulatory requirements; and aims to enhance customer satisfaction through the effective application of the system, including processes for improvement of the system and the assurance of conformity to customer and applicable statutory and regulatory requirements.

What accredited certification to ISO 9001 does not mean

- 1) It is important to recognize that ISO 9001 defines the requirements for an organization's quality management system, not for its products and services. Accredited certification to ISO 9001 should provide confidence in the organization's ability to "consistently provide product that meets customer and applicable statutory and regulatory requirements". It does not necessarily ensure that the organization will always achieve 100% product conformity, though this should of course be a permanent goal.
- 2) ISO 9001 accredited certification does not imply that the organization is providing a superior product or service, or that the product or service itself is certified as meeting the requirements of an ISO (or any other) standard or specification.





Definitions of findings:

Nonconformity:

Non-fulfilment of a requirement.

Major nonconformity:

Nonconformity that affects the capability of the management system to achieve the intended results. Nonconformities could be classified as major in the following circumstances:

- If there is a significant doubt that effective process control is in place, or that products or services will meet specified requirements;
- A number of minor nonconformities associated with the same requirement or issue could demonstrate a systemic failure and thus constitute a major nonconformity.

Minor nonconformity:

Nonconformity that does not affect the capability of the management system to achieve the intended results.

Opportunity for improvement:

It is a statement of fact made by an assessor during an assessment, and substantiated by objective evidence, referring to a weakness or potential deficiency in a management system which if not improved may lead to nonconformity in the future. We may provide generic information about industrial best practices but no specific solution shall be provided as a part of an opportunity for improvement.

How to contact BSI

'Just for Customers' is the website that we are pleased to offer our clients following successful registration, designed to support you in maximising the benefits of your BSI registration - please go to www.bsigroup.com/j4c to register. When registering for the first time you will need your client reference number and your certificate number (47529484/FS 618313).

Should you wish to speak with BSI in relation to your certification, please contact your local BSI office – contact details available from the BSI website:

https://www.bsigroup.com/en-GB/UK-office-locations/

Notes

This report and related documents are prepared for and only for BSI's client and for no other purpose. As such, BSI does not accept or assume any responsibility (legal or otherwise) or accept any liability for or in connection with any other purpose for which the Report may be used, or to any other person to whom the Report is shown or in to whose hands it may come, and no other persons shall be entitled to rely on the Report. If you wish to distribute copies of this report external to your organization, then all pages must be included.

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relevant accreditation bodies. BSI staff, agents and accreditation bodies have signed individual confidentiality undertakings and will only receive confidential information on a 'need to know' basis.

This audit was conducted through document reviews, interviews and observation of activities. The audit method used was based on sampling the organization's activities and it was aimed to evaluate the fulfilment of the audited requirements of the relevant management system standard or other normative document and confirm the conformity and effectiveness of the management system and its continued relevance and applicability for the scope of certification.

As this audit was based on a sample of the organization's activities, the findings reported do not imply to include all issues within the system.

Regulatory compliance

BSI conditions of contract for this visit require that BSI be informed of all relevant regulatory non-compliance or incidents that require notification to any regulatory authority. Acceptance of this report by the client signifies that all such issues have been disclosed as part of the assessment process and agreement that any such non-compliance or incidents occurring after this visit will be notified to the BSI client manager as soon as practical after the event.