

Assessment Report

INFRATEC-UK Ltd

Assessment dates	09/10/2023 to 09/10/2023 (Please refer to Appendix for details)
Assessment Location(s)	Middlesbrough (000)
Report author	Hannah Scott
Assessment Standard(s)	ISO 9001:2015



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Executive summary

The NHSS 8 Stage 2 Assessment of Infratec revealed that the management system of the organisation continues to care for a risk-based approach in achieving conformance to the Standard requirements.

The continued effectiveness of the management system was seen to be achieving the organisation's overall intended outcomes of meeting customer and regulatory requirements.

The linkage to the overall strategy and outcomes were identified during this assessment with areas focussed on the processes of:

- QMS mandatory elements
- Operational Activities

Evidence of continued improvement was demonstrated in all areas of the visit. The core management system elements have been maintained since the last visit. Management controls appear to be somewhat effective.

As a result 0 new conformances have been raised.

In summary a recommendation for NHSS 8

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

Corrective actions with respect to nonconformities raised at the last assessment have been reviewed. Actions were not found to be effectively implemented in all areas. Such areas, identified in subsequent sections of the report, will be further reviewed for closure at the next assessment.

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 conduct a certification assessment to ensure the elements of the proposed scope of registration and the requirements of the management standard are effectively addressed by the organization's management system and to confirm the forward strategic plan.

If this visit is part of a multi-location assessment, the final recommendation will be contingent on the findings from all assessments.

The scope of the assessment is the documented management system with relation to the requirements of 9001:2015 and NHSS 8 Issue 2 and the defined assessment plan provided in terms of locations and areas of the system and organization to be assessed.

9001:2015 and NHSS 8 Issue 2
Infratec management system documentation

Statutory and regulatory requirements

The company's processes for risk, compliance & statutory requirements including inspections, audits, and statutory monitoring were reviewed & evidenced during the assessment & demonstrated effective management

Assessment participants

Name	Position	Opening meeting	Closing meeting	Interviewed (processes)
Lee Payne	Commercial Manager	X	X	X
Paul Lamb	Consultant	X	X	X

Assessment conclusion

BSI assessment team

Name	Position
Hannah Scott	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 certification to the above listed standards, and has been found in general compliance with the audit criteria as stated in the above-mentioned audit plan.

Findings from previous assessments

Finding Reference	2262044-202211-N1	Certificate Reference	FS 618313
Certificate Standard	ISO 9001:2015	Clause	7.1.1
Location reference	0047529484-000		
Assessment Number	3331189		
Category	Minor		
Area/process:	Infrastructure & Work Environment: (Including: Management of Measuring Equipment)		
Details:	Processes associated with the provision and availability of assets required to undertake planed works could not be demonstrated as being fully effective.		
Objective Evidence:	1. Weekly FASSI Crane Checks on SCANIA R500 had not been completed within the last three weeks despite evidence indicating the asset had been used. 2. Two torque wrenches Wera Click-Torque C3 (Serial #'s VE15370 & VG16872) had exceeded their 12 month operational life and had not been replaced (or calibrated)		
Cause			
Weekly FASSI Crane checks had not been completed due to confusion surrounding the need to be carried out as weekly inspections were also being carried out. The torque wrenches had passed their 12 month operational life by 6 days and had not been placed out of service due to the current system not sending a reminder.			
Correction/containment			
FASSI weekly crane checks removed for maintenance plan and weekly inspections are only to be used. 2no Torque wrenches removed immediately from service and calibration log updated			
Corrective action			
A new Maintenance System for equipment to be introduced which sends email reminders when dates are approaching for calibration, LOLERS or any other key dates. A new Workshop Manager has recently been recruited who will oversee all preventative maintenance of all equipment and plant.			
Closed?:			
No			
Justification	To be followed up at the November 2023 assessment.		

Finding Reference	2364865-202307-N1	Certificate Reference	FS 618313
Certificate Standard	ISO 9001:2015	Clause	9.2.1
Location reference	0047529484-000		
Assessment Number	3852059		
Category	Minor		
Area/process:	Performance Evaluation		
Details:	The organisation had not conducted Internal Audits to NHSS8		
Objective Evidence:	No internal audits were seen to be completed to NHSS8		
Cause			
At the start of 2023 the organisation moved to a integrated management and the internal audit process had not been completed			
Correction/containment			
Internal audits to be booked in and completed			
Corrective action			
25 audits completed out of 29			
Closed?:			
Yes			
Justification	Review the audit schedule IMD HSEQ25 Internal Audit schedule - IA014 - Internal Audit operational Planning and control - Covers NHSS8 requirements - Yes		

Finding Reference	2364865-202307-N2	Certificate Reference	FS 618313
Certificate Standard	ISO 9001:2015	Clause	9.3.1
Location reference	0047529484-000		
Assessment Number	3852059		
Category	Minor		
Area/process:	Performance Evaluation		
Details:	The Management Review had not been executed as planned		
Objective Evidence:	There was no evidence of the Management Review planned for 19/12/2022.		

Cause	
Filing structure had changed for the old QMS to the new integrated management and the commercial manager could not find it	
Correction/containment	
File saved in the wrong place now moved to the correct location	
Corrective action	
File saved in the wrong place now moved to the correct location	
Closed?:	
Yes	
Justification	Review Management review - Review corrective action process - MR013 - Management review 19-12-2022

Finding Reference	2364865-202307-N3	Certificate Reference	FS 618313
Certificate Standard	ISO 9001:2015	Clause	10.2.1
Location reference	0047529484-000		
Assessment Number	3852059		
Category	Minor		
Area/process:	Improvement		
Details:	NHSS 8 requires complaints received via the HEA, as administrator of HERS, or via the SSAC shall be investigated and corrective action completed as soon as practicable and no later than six months from the date of being advised of the complaint		
Objective Evidence:	No evidence seen in the management system how this is managed and controlled in relation to meeting the six month timescale to address complaints and corrective action.		
Cause			
Requirements to the NHSS8 is new to the company and this specific requirement was missed			
Correction/containment			
HEA complaint details now documented in the IMS manual. All other NHSS8 requirements reviewed to ensure full compliance			
Corrective action			
Manual now been updated to include the requirement			
Closed?:			
Yes			

Justification

Infratec Integrated management system manual
- section 10.2 now includes the requirement

Findings from this assessment

Opening Meeting :

An opening meeting was held and the scope for the visit discussed in relation to ISO 9001 that specifies requirements for an Quality management system where an organisation needs to demonstrate its ability to consistently provide product that meets customer and applicable statutory and regulatory requirements, and aims to enhance customer satisfaction through the effective application of the system, including processes for continual improvement of the system and the assurance of conformity to customer and applicable statutory and regulatory requirements.

The scope of the certification is confirmed

The processes for the different types of assessments was discussed to clarify the BSI procedures for ISO certification relating to Continuing Assessment, Major Non-conformity Close-out and Strategic Review visits. The potential outcomes and differences between the aforementioned assessments were outlined.

During the opening meeting the client confirmed awareness of the contract conditions and BSI confidentiality statement. The assessment plan was discussed including note taking and the issue of the report. The assessment is based on sampling; all findings are identified at the time. Guides will be available and details of specific Health and Safety aspects were confirmed.

Objective Evidence:-

- Discussion with client

Variable message signs & Communications equipment & associated apparatus on motorways and other highways :

Objective Evidence:-

- Discussion with client
- Documentation

Planned Activities:-

- 8.1 Operational planning and control
- 8.2 Requirements for products and services
 - 8.2.1 Customer communication
 - 8.2.2 Determining the requirements for products and services
 - 8.2.3 Review of the requirements for products and services
 - 8.2.4 Changes to requirements for products and services
- 8.3 Design and development of products and services
 - 8.3.1 General
 - 8.3.2 Design and development planning
- 8.4 Control of externally provided processes, products and services
 - 8.4.1 General
 - 8.4.2 Type and extent of control
 - 8.4.3 Information for external providers
- 8.5 Production and service provision

- 8.5.1 Control of production and service provision
- 8.5.2 Identification and traceability
- 8.5.3 Property belonging to customers or external providers
- 8.5.4 Preservation
- 8.5.5 Post-delivery activities
- 8.5.6 Control of changes

Methods for determining process results are:-

- Internal Audits
- Management Review

Result:-

Operational process flow

- IMPF001 revision 1 issue 2023

Customer and product requirements

- Customer Enquiry / quotations
- KNG2101 - M3 ROTTMS
- QT-KING-M25-01 (Quote)
- QT-KING-M25-02 (Quote)

Commercial Register - Live document

QUOTE TAB

- King transport
- 24/08/2023
- Site attendance
- Accepted
- PO received P23-1154/T50103

The audit followed Cubic Transport

Customer repair returns form

- Cubic Transport
- Customer information
- Product information
- Reason for return
- Signed and submitted

T&R Tracker v2.0

- Job number 111
- Investigation completed
- Repair job sheet - live document - ref REP111-CUB
- 4 items returned for repair

Customer repair returns form

- Centergreat
- Customer information
- Product information
- Reason for return
- Signed and submitted

T&R Tracker v2.0

- Job number 109
- Investigation completed
- Repair job sheet - live document - ref REP109-CGT
- 8 items returned for repair

Repair Acceptance form 03-10-2023

Planning and Operational controls

Commercial Register - Live document

SCHEDULING TAB

Project for 2 nights work. First nights work was cancelled

Project folders

KNG2301 Project work file

SUMMARY TAB

- Project information
- Timesheets
- SharePoint links
- Project work sheets
- Project Team
- Technical Queries
- Early warnings
- Project Manager instructions
- Compensation Event
- General coms
- Quotes
- Task orders
- Payments
- Contract Inception Review (no jobs big enough to requires this so far)

War Board Planner - Live document

- Week commencing 02-10-2023 for the KINGS work
- M3 (Area 5) ROTTMS

Subcontractor Questionnaires

- IMD019 Subcontractor questionnaire
- Rowarth Civils Ltd
- Completed 01-08-2023
- no issues

- Rowarth Civils Ltd approved

Key Supplier & Subcontractor Register - Live document

- Rowarth Civils Ltd approved

Purchasing

- Supplier list
- Yearly reviewed

- Approval status
- Comments seen

Work instructions

- issues via Emails
- RAMS KNG2301-1-M3 ROTTMS v1 26-09-2023 and signature page, all 3 staff have completed the RAMS
- War boards checks
- Site reports - M3 Area 5 ROTTMS Site Report 02-10-2023
- Photos seen from works
- Site reports - M3 Area 5 ROTTMS Site Report 03-10-2023
- Photos seen from works

Equipment controls

Calibration

Assets & Preventative Maintenance Register - Live document

- ASST00009 - Multifunctional tester 29/03/2023 - certificate seen
- ASST00014 - Processmeter - 31-08-2023 - certificate seen

LOLER

LOL-LA Lifting accessories 30-05-2023 every 6 months

LOL-TE Training Equipment 30-05-2023 every 6 months

HIAB - Man 400 - WLZ 6335 14-07-2023 - Crane 24-07-2023

Inspection and testing

- Airtable
- Fleetio
- MEWP Pre use check - YN65CYF 03-10-2023 - all passed and signed
- HIAB - Man 400 TGS - WLZ6335 - 03-10-2023 - all Passed and signed
- MEWP Pre use check - YN65CYF 02-10-2023 - all passed and signed
- HIAB - Man 400 TGS - WLZ6335 - 02-10-2023 - all Passed and signed
- Site acceptance testing

Quality Plan

No works currently require a quality plan. The client demonstrated how they would address this went required

- IMD039 Quality Plan
- Specifications / Contract documents
- Quality Assurance
- Scope of project and service
- Organisational chart
- Roles and Responsibilities
- Audits
- Suppliers/ Materials
- Planned arrangements
- Contract activities (ITP)

Competence

Skill Station (System)

Daniel McCann (Supervisor) - HEA H1188689 exp 23-09-2025

Daniel McCann ECS Invigilator 27-09-2023

Daniel McCann CPCS - Appointed person 31-12-2021

Daniel McCann ECS 16-09-2024

Daniel McCann National Highways common induction course 06-01-2023

Daniel McCann highways passport 06-03-2021

Daniel McCann IPAF 31-05-2021

Brian Mulchrone (Maintenance and installation operative) - HEA - H0244064 exp 25-09-2026

Brian Mulchrone level 2 Buried services 05-01-2021

Brian Mulchrone ECS - 19-07-2023

Brian Mulchrone National Highways common induction course 22-01-2023

Brian Mulchrone highways passport 06-03-2021

Brian Mulchrone IPAF 31-30-2021

Dale Richards (Approved person) - HEA - H1174753 exp 05-11-2024

Dale Richards National Highways common induction course 15-05-2023

Dale Richards highways passport 06-03-2021

Dale Richards CPCS lorry loader 02-07-2021

Communication

Communication matrix

- Contracts
- Website
- Emails
- Telephone
- Customer satisfaction - IMD019 Subcontractor questionnaire
- Quality plan when the plan is in operation to all relevant employees
- HSEQ Meetings 18-09-2023
- Toolbox talks - Working from height - falling objectives signed and completed 22-09-2023

Operational Requirements & Control: Activities relating to operational requirements and control are well defined, and through the sampling of records the effective implementation of these processes was demonstrated.

Document & Record Management: All requested documents were found to be readily available, demonstrating effective retention/ retrieval and subject to appropriate revision control.

- The Processes were found to be effective.

Management System Elements :

Objective Evidence:-

- Discussion with client
- Documentation

Planned Activities:-

- 4.1 Understanding the organization and its context
- 4.3 Determining the scope of the quality management system
- 4.4 Quality management system and its processes

6.2 Quality objectives and planning to achieve them
5.1 Leadership and commitment
5.1.1 General
5.2 Policy
5.2.1 Establishing the quality policy
5.2.2 Communicating the quality policy
7.5.3 Control of documented information
9.1 Monitoring, measurement, analysis and evaluation
9.1.1 General
9.1.2 Customer satisfaction
9.1.3 Analysis and evaluation
9.2 Internal audit
9.3 Management review
9.3.1 General
9.3.2 Management review inputs
9.3.3 Management review outputs
10.1 General
10.2 Nonconformity and corrective action
10.3 Continual improvement

Methods for determining process results are:-

- Internal Audits
- Management Review

Result:-

Scope

Integrate Management System Manual Revision 1.0
- section 4.3.1 NHSS 8 has been identified

Context

Integrate Management System Manual Revision 1.0
- section 4.3.3

Policy

Integrate Management System Manual Revision 1.0
- Section 5.2

Quality Policy -

- Quality Statement - endorsed by David Bullock
- Communicated to the IP's
- Noticeboards on site - display policy
- NHSS 8 has been identified

The policy continues to fulfil the requirements of the standards, is well communicated and subject to regular review by top management.

Objectives

Integrate Management System Manual Revision 1.0
- Section 6.2
IMD004 HSEQ Objectives and Targets
- Ensure Internal Audits schedule is current and up to date and adds value

Objectives/ Targets & Performance Monitoring & Measurement: Processes associated with the identification and periodic monitoring of objectives continues to be well defined and implemented

Legal Compliance

Integrate Management System Manual Revision 1.0

- Section 6.1.3

IMD002 Legal Register & Evaluation of Compliance

IMD037 Standards Reference & associated Document Register

- Sampled the following
- NHSS 8 Issue 2
- The highway electrical training specification
- eighteenth edition

Internal Audit

Integrate Management System Manual Revision 1.0

- section 9.2

IMD HSEQ25 Internal Audit schedule

- IA014 - Internal Audit operational Planning and control 19-09-2023
- No issues raised
- Covers NHSS8 requirements
- IA021 Performance evaluation 27-09-2023
- One OFI raised

Processes associated with the planning of internal audits continue to be well defined and implemented. All sampled audits were found to be well documented and were completed in a timely manner

Corrective action

Corrective actions log - Live document

- CAR 14 - raised 27-09-2023
- Action plan seen
- Closed 27-09-2023

Management Review

Integrate Management System Manual Revision 1.0

- section 9.3

Management review meeting minutes - MR14 29-08-2023

- Review of Risk Assessment
- Review continuing suitability and the effectiveness of conformance of NHSS 8
- Training needs

Management review meeting log 29-08-2023

Activities associated with the annual management review was found to be appropriately documented, with good senior management engagement noted.

- The Processes were found to be effective.

Next visit objectives, scope and criteria

The objective of the assessment is 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 9001:2015 and NHSS 8 Issue 2 and the defined assessment plan provided in terms of locations and areas of the system and organization to be assessed.

9001:2015 and NHSS 8 Issue 2
Infratec 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
21/11/2023			STRATEGIC REVIEW	
		09:00	Opening Meeting (Review of previous non-conformances & company changes, etc.)	
		09:15	STRATEGIC MANAGEMENT SYSTEM ACTIVITIES: (Including; Policy, Organisational Context (Inc. Interested Parties), Scope, Leadership and Risk & Opportunities)	
		09:45	CORE MANAGEMENT SYSTEM ACTIVITIES: (Including; Objectives, Management Review, Internal Audits, Customer Satisfaction/Complaints, Non-Conformance & Corrective Action, Document & Record Management, and Continual Improvement)	
		10:15	Operational: NHSS 8 Site visit	
		12:30	Lunch	
		13:00	STATUTORY/REGULATORY OBLIGATIONS	
			SENIOR MANAGEMENT DISCUSSION	
			STRATEGIC REVIEW & 3 YEAR PLAN	
		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)

Location reference	0047529484-000
Address	INFRATEC-UK Ltd Unit 8-9 Easter Park Barton Road Middlesbrough TS2 1RY United Kingdom
Visit type	Stage 2 Audit
Assessment number	3971281
Assessment dates	09/10/2023
Deviation from audit plan	No
Total number of Employees	32
Effective number of Employees	17
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

		Audit1	Audit2	Audit3	Audit4	Audit5	Audit6
Business area/location	Date (mm/yy):	11/20	11/21	11/22	11/23	07/23	10/23
	Duration (days):	1	1	1	1	1	1
STRATEGIC REVIEW		X			X		
CONTINUOUS ASSESSMENT			X	X			
Opening Meeting (Review of previous non-conformances & company changes, etc.)		X	X	X	X		
STRATEGIC MANAGEMENT SYSTEM ACTIVITIES: (Including; Policy, Organisational Context (Inc. Interested Parties), Scope, Leadership and Risk & Opportunities)		X			X		
CORE MANAGEMENT SYSTEM ACTIVITIES: (Including; Objectives, Management Review, Internal Audits, Customer Satisfaction/Complaints, Non-Conformance & Corrective Action, Document & Record Management, and Continual Improvement)		X	X	X	X		
INFRASTRUCTURE & WORK ENVIRONMENT (Inc. Calibration etc.)				X			
COMPETENCY, AWARENESS & COMMUNICATION				X			
SERVICE DELIVERY ACTIVITIES (Customer Enquiries, Order Processing, ad Purchasing/Sub-Contracting)			X				
PROJECT MANAGEMENT and MANGEMENT OF SITE OPERATIONS				X			
Operational: NHSS 8 Site visit					X		
STATUTORY/REGULATORY OBLIGATIONS					X		
SENIOR MANAGEMENT DISCUSSION		X			X		
STRATEGIC REVIEW & 3 YEAR PLAN		X			X		
Impartiality Review			X				
NHSS 8 Extension of scope						X	

NHSS 8 Confirm scope of certification Integration of NHSS 8 Requirements into Management system - Policy statement - Internal audit - Management review Assessment of project: Operational controls, Work instructions, Equipment controls, Inspection, and testing NHSS 8: Quality Plan Appendix A NHSS 8: External documents Appendix B NHSS 8: Competence Appendix C					X	
NHSS 8 Stage 2						X

Expected outcomes for accredited certification

What accredited management system certification means?

To achieve an organization's objectives related to the Expected Outcomes intended by the management systems standard, the accredited management system certification is expected to provide confidence that the organization has a management system that conforms to the applicable requirements of the specific ISO standard.

In particular, it is to be expected that the organization

- has a system which is appropriate for its organizational context and certification scope, a defined policy appropriate for the intent of the specific management system standard and to the nature, scale and impacts of its activities, products and services over their lifecycles, is addressing risks and opportunities associated with its context and objectives;
- analyses and understands customer needs and expectations, as well as the relevant statutory and regulatory requirements related to its products, processes and services;
- ensures that product, process and service characteristics have been specified in order to meet customer and applicable statutory/regulatory requirements;
- has determined and is managing the processes needed to achieve the Expected Outcomes intended by the management system standard;
- has ensured the availability of resources necessary to support the operation and monitoring of these products, processes and services;
- monitors and controls the defined product process and service characteristics;
- aims to prevent nonconformities, and has systematic improvement processes in place including the addressing of complaints from interested parties;
- has implemented an effective internal audit and management review process;
- is monitoring, measuring, analysing, evaluating and improving the effectiveness of its management system and has implemented processes for communicating internally, as well as responding to and communicating with interested external parties.

What accredited management systems certification does not mean?

It is important to recognize that management system standards define requirements for an organization's management system, and not the specific performance criteria that are to be achieved (such as product or service standards, environmental performance criteria etc).

Accredited management systems certification should provide confidence in the organization's ability to meet its objectives related to the intent of the management system standard. A management systems audit is not a full legal compliance audit, and does not necessarily ensure ethical behaviour or that the organization will always achieve 100% conformity and legal compliance, though this should of course be a permanent goal.

Within its scope of certification, accredited management systems certification does not imply or ensure, for example:

- that the organization is providing a superior product and service, or
- that the organization's product and 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

Visit the BSI Connect Portal, our web-based self-service tool to access all your BSI assessment and testing data at a time that's convenient to you. View future audit schedules, submit your corrective action plans and download your reports and Mark of Trust logos to promote your achievement. Plus, you can benchmark your performance using our dashboards to help with your continual improvement journey.

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.

BSI, its staff and agents shall keep confidential all information relating to your organization and shall not disclose any such information to any third party, except that in the public domain or required by law or 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.