

# Assessment Report

## InfraTec UK Ltd

Assessment dates	21/12/2017
Assessment location	Middlesbrough (000)
Report author	Nathan Chivers
Assessment standards	ISO 9001:2008/2015



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## Executive summary

The organisations management system continues to demonstrate effective compliance to ISO 9001:2008 and to ISO 9001:2015. Good progress towards transition was evidenced and transition is now considered complete, so a transition to ISO 9001:2015 is recommended.

Areas of effective compliance was determined, including context of the organisation and leadership / engagement. It was evident through the audit that Top Management had a clear oversight of the risks and opportunities that reflect the strategic direction of the company.

Local controls seemed appropriate for the organisation and their effectiveness was clearly demonstrated throughout the assessment. All employees interviewed during this assessment demonstrated a clear understanding of company expectations.

3 Minor non-conformances were identified from this visit relating to Calibration, Internal Auditing\* and Management Review\*.

*\*Non-conformances raised against ISO 9001:2015*

**Continued compliance to the requirements of ISO 9001 have been effectively demonstrated and transition to ISO 9001:2015 is recommended at this time.**

## Assessment objective, scope and criteria

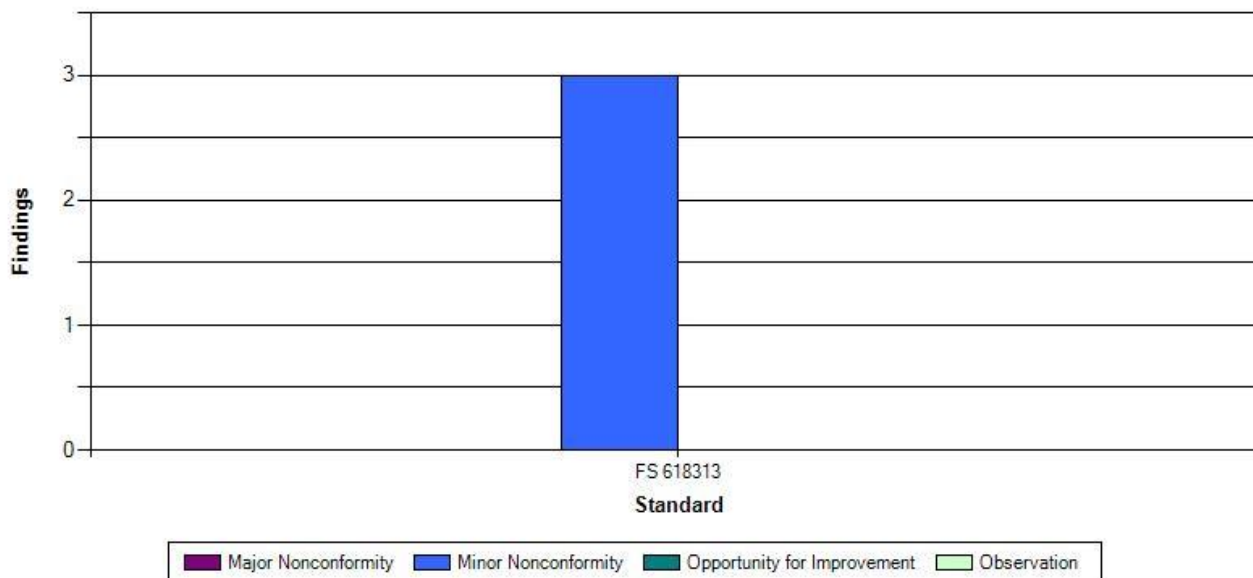
The objective of the assessment was to ascertain the integrity of the organization's management system over the current assessment cycle to enable recertification and confirm the forward strategic assessment plan.

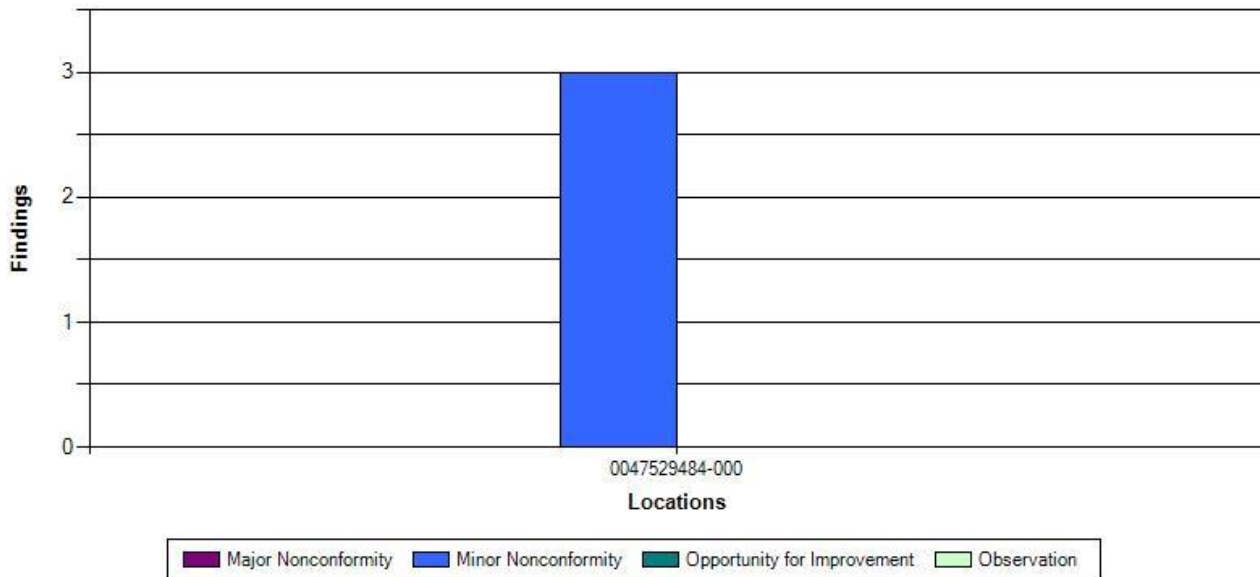
The scope of the assessment is the documented management system with relation to the requirements of ISO 9001:2008/2015 and the defined assessment plan provided in terms of locations and areas of the system and organization to be assessed.

ISO 9001:2008/2015  
Infratec-UK management system documentation

## NCR summary

### Which standard(s) BSI recorded findings against



**Where BSI recorded findings****Definitions:**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.

## Assessment participants

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

## Status of actions from the previous assessment

Ref	Area/process	Clause
<b>1415056N1</b>	System Management	8.2.2
<b>Scope</b>	FS 618313	
<b>Certificate Standard</b>	ISO 9001:2008	
<b>Category</b>	Minor	
<b>Details:</b>	The internal audit process was not shown to be fully effective.	
<b>Objective evidence:</b>	The full internal audit completed 26/09/2016 did not address all of the relevant clauses of the standard.	
<b>Cause</b>	<p>4 Audits were scheduled in 2016 however due to various reasons audits were not completed in a timely manner. As part of the recovery plan it was determined that a single audit would be undertaken incorporating the scope of the original 4 planned audits.</p> <p>The single audit was based upon the planned assessment of Operational Activities, and audit scope was expanded to include other areas of the management system however due in-experience with ISO 9001:2008 not all elements were covered.</p> <p>Root Cause: Ineffective planning of internal audits, and fully understanding the requirements of ISO 9001:2008</p>	
<b>Correction / containment</b>	None - NC was identified at the end of the audit year. (See Corrective Action)	
<b>Corrective action</b>	<p>For 2017 a single audit covering all areas of the management system and of ISO9001:2008 was scheduled and completed.</p> <p>Audit reviewed as part of this assessment. Non-conformance is deemed to be closed.</p>	
<b>Closed?:</b>	Yes	

Ref	Area/process	Clause
<b>1415056N2</b>	System Management	8.5.2
<b>Scope</b>	FS 618313	
<b>Certificate Standard</b>	ISO 9001:2008	
<b>Category</b>	Minor	
<b>Details:</b>	The corrective action process for internal audit nonconformities was not shown to be effective.	
<b>Objective evidence:</b>	Two "Actions" identified in the internal audit report 26/09/2016 were not recorded and tracked using the "Corrective Action Request Tracking". And for "Actions" that were recorded there was no record of the investigation nor confirmation that the actions taken were effective.	
<b>Cause</b>	The management review process was used to monitor the timely recording of Internal non-conformances within the CAR system, however the annual management review was an inappropriate method of monitoring compliance due to its frequency.	
<b>Correction / containment</b>	Missing Non-Conformance are to be recorded within the CAR Register by mid-January 2017. Action Complete, CAR's 34 & 35 reported.	
<b>Corrective action</b>	The CAR process has been revised with the Operations Manager taking an active role in monitoring timely progression of all CARS.  Effective implementation verified. Non-conformance considered close.	
<b>Closed?:</b>	Yes	

## Assessment findings

### The assessment was conducted on behalf of BSI by

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 - Corrective Action Plan Required ('Minor' findings only): The audited organization may be recommended for certification / continued certification, based upon the acceptance of a satisfactory corrective action plan for all 'Minor' findings as shown in this report. Effective implementation of corrective actions will be reviewed during the next surveillance audit.

Please submit a plan to BSI detailing the nonconformity, the cause, correction and your proposed corrective action, with responsibilities and timescales allocated. The plan is to be submitted no later than 12/01/2018 by e-mail to [msuk.caps@bsigroup.com](mailto:msuk.caps@bsigroup.com), referencing the report number, or through the BSI Assurance Portal if this is enabled for your account.

### Use of certification documents, mark / logo or report

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

## Findings

### Top Management Interview:

Key elements from interview where:

- Continue to consolidate relationships with principle client (85% of work & turnover)
- Investigation into opportunities of diversification into Motorway Communication Infrastructure Projects, with other Tier 1 clients.
- Investigate partnership opportunities with Tier 2 parties to present wider portfolio of services.
- Investigate work opportunities in Scotland, Ireland & Northern Ireland.

Risks/Opportunities:

- Currently "dependency" on two principle clients
- Maintaining adequate resources to permitting expansion into new geographical area and technologies whilst maintaining existing core client base.
- Changes to Strategic Government Investment in Transport infrastructure.
- The availability of trained, & competent staff to support future expansion.



**Stakeholders/Interested Parties:**

Employees, Senior Management, Business Owners, Clients, Competitors, Government Bodies, and Membership Organisations such as LANTRA and the Highway Registration Scheme (HERS)

The interview demonstrated that the Managing Director had a clear overview of the extent of the QMS (its scope), the strategic risks and opportunities and interested parties.

**Core Management System Activities & Processes (Policy, Risk & Opportunities, Interested Parties,, Objectives, Management Review, Internal Audits, Customer satisfaction/Complaints, Non-Conformance & Corrective Action, Document & Record Management, and Continual Improvement):****Evidence Reviewed:**

- QMS001 Quality Manual (Rev. 1 : 01/10/17)
- Section 4: Context of Organisation
- Section 5: Quality Policy
- QMD006 Risk Management procedure (Rev. 1 : 01/10/17)
- QMD001 Context of the Organisation (COTO)
- Risk & Opportunities Register
- Interested Parties Matrix
- QMD007 Management Review procedure (Rev. 2 : 01/10/17)
- Management Review (January 2017 & June 2017)
- QMD023 Internal Audit procedure (Rev. 1 : 01/10/17)
- Internal Audit #4 (2017 QMS Audit)
- QMD024 Corrective & Preventative Action procedure (Rev. 2 : 01/10/17)
- Corrective Action Report Register:
- #45 Internal Audit Non-Conformance (13/10/17)
- #40 Other Opportunity for Improvement (01/07/17)
- #37 Management Review Action (12/06/17)
- #35 Internal Audit Non-Conformance (23/01/17)
- #34 Internal Audit Non-Conformance (23/01/17)
- #33 External (BSI) Audit Non-Conformance (23/01/17)
- #32 External (BSI) Audit Non-Conformance (23/01/17)
- #30 Management Review Action (23/01/17)
- QMD002 Control of Documents procedure (Rev. 2 : 01/10/17)
- QMD003 Control of Records procedure (Rev. 2 : 01/10/17)

**Method for determining results:**

Review of documentation, records, & interviews.

**Results:**

**Policy:** The policy formed part of the Quality Manual. It satisfied the requirements of the standard and was considered appropriate to the company. Policy is communicated to all staff via New Starter Induction, Employee handbook, and is displayed on the company noticeboard.

**Risk & Opportunities:** Risk and Opportunities register reflects the risks communicated by Top Management and appeared to be appropriate to the company.

**Interested Parties:** The Interested parties matrix reflects the interested parties communicated by Top Management and appeared to be appropriate to the company.

**Objectives:** Objectives for 2017 had been established and there was clear evidence that these had been monitored and adequately resourced and appeared appropriate to the organisation.

**Management Review:** Management review is undertaken on a 6 monthly frequency, and the two previous management reviews were well supported by top management and satisfied the requirements of ISO 9001:2008. However these reviews did not satisfy the requirements of ISO 9001:2015. Non-Conformance 1572522-201712-N1 raised.

**Internal Audits:** During 2017 all audit requirements were addressed in a single internal audit. Whilst this internal satisfied the requirements of ISO 9001:2008, it did not fulfil the requirements of ISO 9001:2015. Non-Conformance 1572522-201712-N2 raised.

**Customer Satisfaction/Complaints:** Customer satisfaction is monitored through regular client meetings and through effective communication which seemed appropriate for this organisation. The company had received no complaints since the previous assessment.

**Non-Conformance & Corrective Action:** The CAR process was an effective tool for effectively managing all internal non-conformances, opportunities for improvement, management actions, and employee feedback.

**Document & Record Management:** Document and Record control management was deemed to be effective with clear evidence of document and record retention.

**Continual Improvement:** The majority of continuous improvement initiatives in 2017 were related to the transition to ISO 9001:2015. Initiatives (such as the new CAR tool) are well managed and effective and are adding significant value to the company.

**Planned objective:**

Planned objectives have been mostly realised/Planned results have been achieved with 1 minor non-conformance.

**Project Management (Including Winning Business, and Planning & Management of Site Operations) and Purchasing :**

## Evidence Reviewed:

- QMD011 Customer Enquiry/Quotation procedure (Rev. 1 01/10/17)
- QMD012 Forecast Planning procedure (Rev. 1 01/10/17)
- QMD015 Site Mobilisation procedure (Rev. 2 01/10/17)
- QMD016 Service Delivery procedure (Rev. 1 01/10/17)
- QMD013 Purchasing procedure (Rev. 1 01/10/17)
- QMD017 Sub-Contract management procedure (Rev. 1 01/10/17)
- QMD019 Outsourced Processes procedure (Rev. 1 01/10/17)
- Project Documentation relating to Project VMS1708 (Planned Works)
- Project Plan & Schedule
- Project Tracker (Communication with Client)
- Site Diary
- Project Documentation relating to reactive Projects; VMS-S-1746-A2 (14/11/17) & VMS-S-1743-A1 (23/10/17)
- Site Visit reports and Configuration Reports for Identification& Traceability

## Method for determining results:

Review of documentation, records, & interviews.

## Results:

## Project Management:

From the 3 projects sampled project management appeared to function effectively with clear communication between the customer, Project Management, and Site Personnel. The effective planning and scheduling of work ensured that customer targets could be achieved with available resource. Communication of site activities is achieved through "Site Visit Reports" for reactive projects which identify any problems that have occurred or other observations etc. For longer running Projects (ie. Planned Works) communication is achieved via. a regularly maintained via the Site Diary which is communicated to the client.

## Purchasing:

The company purchases minimal material to support installation with almost all material being free issue by the client. Purchasing is typically limited to basic "off the shelf" consumables that are available to the general public and are not subject to any particular control of evaluation. The organisation does however hire plant equipment, and this is booked from a nationwide plant hire company. Performance of the plant hire company is evaluated by site personnel with feedback communicated via the site visit reports.

## Planned objective:

Planned objectives have been fully realised/Planned results have been fully achieved.

**Site Tour (including; Infrastructure, Work Environment, Customer Owned Property, Management of Non-Conforming Material, Competency & Awareness, Calibration):**

Evidence Reviewed:

- QMD008 Training procedure (Rev. 1 01/10/17)
- Company Training Matrix
- Management Competency's
- Future Training Requirements
- Technical Skills Training Status
- Highway Electrical Registration Scheme (HERS) Competency Portfolios for 4 Staff\*
- QMD 009 Preventative Maintenance procedure (Rev. 1 01/10/17)
- QMD 021 Control of Third Party Property procedure (Rev. 1 01/10/17)
- QMD 022 Control of Non-Conforming Product procedure (Rev. 1 01/10/17)
- QMD 010 Calibration Procedure (Rev. 2 01/10/17)
- Equipment Calibration Register
- Measuring equipment subject to calibration:
- Asset # MM001 : Fluke 123 Multi Meter
- Asset # MM002 : Fluke 175 Multi Meter (Calibration Certificate: STD74855 : 01/02/17)
- Asset # MTE001 : Fluke 1567 Multifunctional Tester
- Asset # MTE003 : Extech Earth Ground Tester (Calibration Certificate : STD85401 : 14/10/17)
- Asset # DMF001 : Megger MFT1730 Tester (Calibration Certificate : 622364 : 31/10/17)

\*Staff names have been omitted from this report to preserve confidentiality,

Method for determining results:

Review of documentation, records, observation & interviews.

Results:

- a) Infrastructure & Work Environment are suitable and sufficient to allow effective operations to be undertaken.
- b) Customer owned property and associated non-conforming material is identified and were appropriate separated to prevent un-intended use. Material storage adequate to ensure preservation of integrity.
- c) Competency and training records were well maintained and all staff interview and observed through this assessment appeared to be full aware of their involvement in complying with the requirement of local procedures etc.
- d) Calibration controls were in place however the effectiveness of the process was not demonstrated with 2 pieces of equipment not having calibration certificates available. Non-conformance 1572522-201712-N3 raised.

Planned objective:

Planned objectives have been fully realised/Planned results have been fully achieved.

**Minor (3) nonconformities arising from this assessment.**

<b>Ref. no</b>	1572522-201712-N1
<b>Area/process</b>	Core Management System Activities & Processes (Policy, Risk & Opportunities, Interested Parties,, Objectives, Management Review, Internal Audits, Customer satisfaction/Complaints, Non-Conformance & Corrective Action, Document & Record Management, and Continual Improvement)
<b>Clause</b>	2015:9.3.2
<b>Scope</b>	FS 618313
<b>Certificate Standard</b>	ISO 9001:2008
<b>Category</b>	Minor
<b>Statement of non-conformance:</b>	The management review did not cover all of the mandated inputs.
<b>Clause requirements</b>	<p>Management review inputs</p> <p>The management review shall be planned and carried out taking into consideration:</p> <ul style="list-style-type: none"> <li>a) the status of actions from previous management reviews;</li> <li>b) changes in external and internal issues that are relevant to the quality management system;</li> <li>c) information on the performance and effectiveness of the quality management system, including trends in: <ul style="list-style-type: none"> <li>1) customer satisfaction and feedback from relevant interested parties;</li> <li>2) the extent to which quality objectives have been met;</li> <li>3) process performance and conformity of products and services;</li> <li>4) nonconformities and corrective actions;</li> <li>5) monitoring and measurement results;</li> <li>6) audit results;</li> <li>7) the performance of external providers;</li> </ul> </li> <li>d) the adequacy of resources;</li> <li>e) the effectiveness of actions taken to address risks and opportunities (see 6.1);</li> <li>f) opportunities for improvement.</li> </ul>
<b>Objective evidence</b>	The June 2017 Management review failed to review all requirements including; e) the effectiveness of actions taken to address risks and opportunities
<b>Cause</b>	
<b>Correction / containment</b>	
<b>Corrective action</b>	

<b>Ref. no</b>	1572522-201712-N2
<b>Area/process</b>	Core Management System Activities & Processes (Policy, Risk & Opportunities, Interested Parties,, Objectives, Management Review, Internal Audits, Customer satisfaction/Complaints, Non-Conformance & Corrective Action, Document & Record Management, and Continual Improvement)
<b>Clause</b>	2015:9.2.1
<b>Scope</b>	FS 618313
<b>Certificate Standard</b>	ISO 9001:2008
<b>Category</b>	Minor
<b>Statement of non-conformance:</b>	The internal audit plan did not address all areas of the companies management system and did not address all areas of the standard.
<b>Clause requirements</b>	The organization shall conduct internal audits at planned intervals to provide information on whether the quality management system: a) conforms to: 1) the organization's own requirements for its quality management system; 2) the requirements of this International Standard; b) is effectively implemented and maintained.
<b>Objective evidence</b>	The 2017 Audit Plan and the 207 Internal audit conducted in October (Audit #4) failed to include Risks & Opportunities (6.1), and the needs & expectations of Interested Parties (4.2).
<b>Cause</b>	
<b>Correction / containment</b>	
<b>Corrective action</b>	

<b>Ref. no</b>	1572522-201712-N3
<b>Area/process</b>	Site Tour (including; Infrastructure, Work Environment, Customer Owned Property, Management of Non-Conforming Material, Competency & Awareness, Calibration)
<b>Clause</b>	7.6
<b>Scope</b>	FS 618313
<b>Certificate Standard</b>	ISO 9001:2008
<b>Category</b>	Minor

<b>Statement of non-conformance:</b>	Controls associated to the management of calibration could not be demonstrated as being effective.
<b>Clause requirements</b>	<p>Control of monitoring and measuring equipment</p> <p>The organization shall determine the monitoring and measurement to be undertaken and the monitoring and measuring equipment needed to provide evidence of conformity of product to determined requirements.</p> <p>The organization shall establish processes to ensure that monitoring and measurement can be carried out and are carried out in a manner that is consistent with the monitoring and measurement requirements.</p> <p>Where necessary to ensure valid results, measuring equipment shall</p> <ul style="list-style-type: none"> <li>a) be calibrated or verified, or both, at specified intervals, or prior to use, against measurement standards traceable to international or national measurement standards; where no such standards exist, the basis used for calibration or verification shall be recorded (see 4.2.4);</li> <li>b) be adjusted or re-adjusted as necessary;</li> <li>c) have identification in order to determine its calibration status;</li> <li>d) be safeguarded from adjustments that would invalidate the measurement result;</li> <li>e) be protected from damage and deterioration during handling, maintenance and storage.</li> </ul> <p>In addition, the organization shall assess and record the validity of the previous measuring results when the equipment is found not to conform to requirements. The organization shall take appropriate action on the equipment and any product affected.</p> <p>Records of the results of calibration and verification shall be maintained (see 4.2.4). When used in the monitoring and measurement of specified requirements, the ability of computer software to satisfy the intended application shall be confirmed. This shall be undertaken prior to initial use and reconfirmed as necessary.</p> <p>NOTE Confirmation of the ability of computer software to satisfy the intended application would typically include its verification and configuration management to maintain its suitability for use.</p>
<b>Objective evidence</b>	<p>Unable to locate calibration records for two assets listed on the calibration equipment register:</p> <ul style="list-style-type: none"> <li>- Asset # MM001 : Fluke 123 Multi Meter</li> <li>- Asset # MTE001 : Fluke 1567 Multifunctional Tester</li> </ul>
<b>Cause</b>	
<b>Correction / containment</b>	
<b>Corrective action</b>	

## Our next steps

### Next visit plan

Date	Auditor	Time	Area/process	Clause
12/11/2018	N.Chivers	09:00	Opening Meeting	
			Risks & Opportunities & Interested parties	Management Activities
			Management System - Changes (to include) Customer Complaints, Corrective Actions, Preventive Actions, Management Review, Customer Satisfaction, Quality Objectives, Improvements and Internal Audits, including logo review.	
			Control of Documents and Records	
		12:30	Lunch	
		13:00	Customer Enquiry's and Order Processing	Service Delivery
			Purchasing and Project Management	
		15:00	Report Preparation	
		16:00	Closing Meeting	

### 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 9001:2008/2015  
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.

## Your next steps

### NCR close out process

Corrective actions with respect to nonconformities raised at the last assessment have been reviewed and found to be effectively implemented.

3 minor nonconformities requiring attention were identified. These, along with other findings, are contained within subsequent sections of the report.

A minor nonconformity relates to a single identified lapse, which in itself would not indicate a breakdown in the management system's ability to effectively control the processes for which it was intended. It is necessary to investigate the underlying cause of any issue to determine corrective action. The proposed action will be reviewed for effective implementation at the next assessment.

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

### How to contact customer service

'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](http://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 registration, please contact our Customer Engagement and Planning team:

Customer Services  
BSI  
Kitemark Court,  
Davy Avenue, Knowlhill  
Milton Keynes  
MK5 8PP

Tel: +44 (0)345 080 9000  
Email: [MK.Customerservices@bsigroup.com](mailto:MK.Customerservices@bsigroup.com)

## Appendix: Your certification structure & on-going assessment programme

### Scope of certification

#### FS 618313 (ISO 9001:2008)

The planning, 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 9001:2008)

<b>Location reference</b>	0047529484-000
<b>Address</b>	InfraTec UK Ltd Unit 8-9 Easter Park Barton Road Middlesbrough TS2 1RY United Kingdom
<b>Visit type</b>	Re-certification Audit (SR Opt 1)
<b>Assessment reference</b>	8628696
<b>Assessment dates</b>	21/12/2017
<b>Audit plan (revision date)</b>	07/12/2016
<b>Deviation from audit plan</b>	Yes
<b>Reason for deviation from audit plan</b>	Amended at the request from the client to facilitate transitional activities to ISO 9001:2015. This is the last scheduled visit prior to the September 2018 deadline. Assessment cycle updated to reflect scope of visit.
<b>No. of full time equivalent employees</b>	7
<b>Total no. of effective employees at the site</b>	7
<b>Scope of activities at the site</b>	The planning and management of installation and commissioning services for driver information and traffic monitoring systems.
<b>Assessment duration</b>	1 day(s)

## 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.

The following changes in relation to the certified organization activities, products or services covered by the scope of certification were identified:

Scope wording amended to reflect the "management" of site operations, since no site activities have not been reviewed by certification body in this certificate cycle.

The reference or normative documents applicable to the scope of certification were revised as follows:

Management system restructured to better satisfy requirements of ISO 9001:2015 and continual improvements initiatives from 2016/17.

## Certification assessment programme

**Certificate number - FS 618313**

**Location reference - 0047529484-000**

		<b>Audit1</b>	<b>Audit2</b>	<b>Audit3</b>	<b>Audit4</b>	<b>Audit5</b>	<b>Audit6</b>
<b>Business area/location</b>	<b>Date (mm/yy):</b>	11/15	11/16	11/17	11/18	11/19	11/20
	<b>Duration (days):</b>	1	1	1	1	1	1
Management System - Changes (to include) Customer Complaints, Corrective Actions, Preventive Actions, Management Review, Customer Satisfaction, Quality Objectives, Improvements and Internal Audits, including logo review.		X	X	X	X	X	X
Customer Enquiry's and Order Processing		X	X		X		
Purchasing and Project Management		X		X	X		
Installation (Site Visit)				X			
Test and Repair			X				
Commissioning				X			
Control of Documents and Records		X	X	X	X	X	X
Training and Competence			X	X		X	
Calibration and Maintenance		X		X		X	
Transition - ISO 9001:2015		X	X	X			
Top Management Interview			X	X			X
Strategic Review				X			X
NEW - Risks & Opportunities & Interested parties				X	X		X
NEW - Management of Site Operations				X		X	

## 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 not been assessed during the current review period.

There has been no site visit during this certification cycle. Client has agreed to amend scope of certificate to "The planning, and management of installation and commissioning services for driver information and traffic monitoring systems.

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.

N/A

**Strategic review pack summary**

During the certification cycle no major non-conformances have been identified however a total of 4 minor non-conformances have been raised.

1 Non-Conformance raised against Management Review

2 Non-Conformances raised against Internal Audits

a) Audit plan did not cover all requirements of ISO 9001

b) Delay in completing planned audits

1 Non-Conformance raised against management of internal audits non-conformances.

Whilst 3 of the 4 non-conformances relating to internal audit activities the each address a different phase of the internal audit process, Planning, Conducting, and Non-Conformance management, and based on this analysis its is concluded that there is no obvious trends or concerns since each non-conformance was addressed in a timely manner and has not been repeated indicating that implement corrective action has been effective.

A review of Observations (x2) and Opportunities for Improvement (x1) indicate that there are no trends or areas of concern that warrant any special attention.

**Progress in relation to management system objectives.**

Management system objectives along with other quality objectives continue to be set by Managing Director and Operations Director as part of the Management Review process with objectives monitored on a regular basis throughout the year, however given the size of the company (5 employees including the two senior managers) these review is often in-formal and un-documented, however objectives are meet so the process is deemed effective at this time.

**Leadership, commitment and strategy**

Both the Managing Director and Operations Director are both co-owners of the business and have active and key roles within the business. With the company consisting of 5 employees (including the MD and CM) the Management Team operate in a very hands-on manner, and in addition to managing the company take an active role in day-to day installation and commissioning activities ensuring effective communication etc.

Leadership, Commitment and Strategy is deemed to be effective.

**Effectiveness of the Management System**

To support an application to transition to ISO 9001:2015, a full review of the management system was undertaken as part of this recertification visit. The effectiveness of inter-action between all elements of the management system was reviewed and found to be effective demonstrating continued compliance to ISO 9001.

**Impartiality review**

Impartiality has been achieved.

Over the previous certification cycle the client has had a total of 4 visits with 4 different BSI CM's. The client has expressed a request for continuity in CM attendance but understands the 2 visit cycle limit.

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:

No 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.

## 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 on-site 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.*