

# Assessment Report

## InfraTec UK Ltd

Assessment dates	15/11/2018 to 15/11/2018 (Please refer to Appendix for details)
Assessment Location(s)	Middlesbrough (000)
Report author	Nathan Chivers
Assessment Standard(s)	ISO 9001:2015



## Table of contents

Executive summary .....	3
Changes in the organization since last assessment .....	3
NCR summary graphs .....	3
Your next steps.....	4
NCR close out process.....	4
Assessment objective, scope and criteria .....	4
Assessment participants .....	4
Assessment conclusion .....	5
Findings from previous assessments .....	6
Findings from this assessment .....	9
STRATEGIC MANAGEMENT SYSTEM ACTIVITIES: (Including; Policy, Organisational Context (Inc. Interested Parties), Scope, & Risk & Opportunities): .....	9
CORE MANAGEMENT SYSTEM ACTIVITIES: (Including; Objectives, Management Review, Internal Audits, Customer Satisfaction/Complaints, Non-Conformance & Corrective Action, Document & Record Management, and Continual Improvement): .....	10
SERVICE DELIVERY: (Inc. Customer Enquiry, Quotes and Order Processing, and Purchasing/Sub-Contracting) :	11
Next visit objectives, scope and criteria.....	12
Next visit plan.....	13
Appendix: Your certification structure & ongoing assessment programme.....	14
Scope of certification .....	14
Assessed location(s).....	14
Certification assessment programme .....	15
Expected outcomes for accredited certification.....	16
Definitions of findings:.....	16
How to contact BSI.....	17
Notes.....	17
Regulatory compliance .....	18

## Executive summary

Senior Management continue to utilise the quality management system as an effective process for managing the business and fulfilling its strategic objectives. The management system has demonstrated that it continues to support the business in continual improvement and ensuring that all customer needs and expectations are understood and achieved.

Staff seen during the assessment were competent and knowledgeable of the work being undertaken and following the company procedures. There is evidence of controlled processes & procedures in place covering all relevant functional areas of the business assessed

- All 3 of the historic non-conformances were reviewed and have now been closed.
- No new non-conformances have been identified during this assessment.
- No new opportunities for improvement have been observed during tis assessment.

**Continued certification 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

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

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 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 and where applicable to identify potential areas for improvement of the management system.

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

## 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

## 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 continued 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.

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

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

## Findings from previous assessments

<b>Finding Reference</b>	1572522-201712-N1	<b>Certificate Reference</b>	FS 618313
<b>Certificate Standard</b>	ISO 9001:2015	<b>Clause</b>	2015:9.3.2
<b>Category</b>	Minor		
<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>Details:</b>	The management review did not cover all of the mandated inputs.		
<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>	Human error/oversight. The management review was held prior to the commencement of transitional activities and and as such did not fully address the requirements of the standard.		
<b>Correction / containment</b>	None - There is no value in retrospectively amending the management review.		
<b>Corrective action</b>	The management review template is to be updated and the 3 monthly management review (due January'18) will utilise this new template.  (ACTION COMPLETE: Management reviews in conducted to date have utilised the revised template)		
<b>Closed?:</b>	Yes		

<b>Finding Reference</b>	1572522-201712-N2	<b>Certificate Reference</b>	FS 618313
<b>Certificate Standard</b>	ISO 9001:2015	<b>Clause</b>	2015:9.2.1
<b>Category</b>	Minor		
<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>Details:</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>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>	Human error/oversight. The internal audit plan was developed prior to the commencement of transitional activities and and as such did not fully address the requirements of the standard.		
<b>Correction / containment</b>	None - This non-conformance was identified late December after the 2017 audit program had been completed so Correction was considered to be appropriate.		
<b>Corrective action</b>	The 2018 Audit program is to reflect the fully requirements of the standard.  (ACTION COMPLETE: The 218 audit program does fully address the standard and all scheduled audits have been completed in a timely manner and are well documented.)		
<b>Closed?:</b>	Yes		

<b>Finding Reference</b>	1572522-201712-N3	<b>Certificate Reference</b>	FS 618313
<b>Certificate Standard</b>	ISO 9001:2015	<b>Clause</b>	7.6
<b>Category</b>	Minor		
<b>Area/process:</b>	Site Tour (including; Infrastructure, Work Environment, Customer Owned Property, Management of Non-Conforming Material, Competency & Awareness, Calibration)		
<b>Details:</b>	Controls associated to the management of calibration could not be demonstrated as being effective.		
<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>	Each measurement asset had been identified with a asset number but the asset register made no reference to the unique serial number applied to the asset by the OEM. When the asset number faded it was impossible to fully trace the asset.		
<b>Correction / containment</b>	The Asset Register/Calibration Log is to be updated to include Make, Model and Serial Number to provide improved traceability. (Action Complete)		
<b>Corrective action</b>	N/A - A review of the asset register after the BSI assessment established that these two assets were the only ones were traceability had been lost. This is therefore considered to be an isolated incident.		
<b>Closed?:</b>	Yes		



## Findings from this assessment

### **STRATEGIC MANAGEMENT SYSTEM ACTIVITIES: (Including; Policy, Organisational Context (Inc. Interested Parties), Scope, & Risk & Opportunities)**

Evidence Witnessed during Assessment:

- QMS001 Quality Manual (Rev. 4 : 21/05/18)
  - > Section 4: Context of Organisation & Scope
  - > Section 5: Quality Policy
- QMP006 Risk Management procedure (Rev. 1 : 01/10/17)
- QMD001 Context of the Organisation (COTO)
  - > Risk & Opportunities Register
  - > Interested Parties Matrix
- QMD004 Organisation Chart

Organisations method for determining effectiveness:

Review of internal audits, records & observation

Results:

Policy: The policy continues to satisfy the requirements of the standard and is communicated internal via the company notice board. The policy is communicated externally via the "Initiation to Tender Process".

Organisational Context (Inc. Interested Parties): Organisation context continues to be well defined within the Quality Manual and Context of Organisation (COTO) document.

Scope: Organisation context continues to be well defined within the Quality Manual.

Roles, Responsibilities & Authorities: Roles, responsibilities & authorities continue to be well defined within the Quality Manual, Organisation Chart document and company procedures.

Risk & Opportunities: Risk & opportunities continue to be well documented within the COTO document.

Planned objective:

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

## **CORE MANAGEMENT SYSTEM ACTIVITIES: (Including; Objectives, Management Review, Internal Audits, Customer Satisfaction/Complaints, Non-Conformance & Corrective Action, Document & Record Management, and Continual Improvement)**

Evidence Witnessed during Assessment:

- QMS001 Quality Manual (Rev. 4 : 21/05/18)
  - > Appendix A: Process Overview & Interaction
- QMD007 Management Review procedure (Rev. 2 : 01/10/17)
- Management Review (17/05/18, 12/07/18 & 27/09/18)
- QMD023 Internal Audit Procedure (Rev. 1 : 01/10/17)
- Internal Audit #5 (2018 Service Delivery Audit)
- QMD024 Corrective & Preventative Action Procedure (Rev. 2 : 01/10/17)
- Corrective Action Report Register:
  - > #42 External (BSI) Audit Non-Conformance (Closed: 10/01/18)
  - > #43 External (BSI) Audit Non-Conformance (Closed: 10/01/18)
  - > #44 External (BSI) Audit Non-Conformance (Closed: 10/01/18)
  - > #46 Internal Non-Conformance (Closed: 17/04/18)
  - > #47 Internal Non-Conformance (Closed: 23/04/18)
- QMD002 Control of Documents procedure (Rev. 2 : 01/10/17)
- QMD003 Control of Records procedure (Rev. 2 : 01/10/17)

Organisations method for determining effectiveness:

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

Results:

Objectives: Objectives continue to be well defined and are subject to 3 monthly monitoring via the Management Review process.

Management Review: Management Review process continues to operate effectively with good attendance by the management team.

Internal Audits: Internal audit planning has been revised since the last visit. The organisation has now scheduled 4 internal audits a 2 year period. The schedule covers all areas of the management system and standard. 1 Audit has been completed and found to be well documented.

Customer Satisfaction/Complaints: No customer complaints have been received since the last assessment. Customer satisfaction continues to be assessed through regular contact between the senior management team and the client. This process was considered effective, and no evidence was observed to counter this observation.

Non-Conformance & Corrective Action: Non-conformances were found to be well documented and those sampled were found to be well managed ensuring timely and robust resolution.

Document & Record Management: All documents and records were found to be readily available. All documents were found to be well controlled with appropriate revision control where required.

Continual Improvement: Continual improvement initiatives continue to be well facilitated through the setting of objectives and internal audits and were monitored and managed via the Management Review process.

Planned objective:

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

## **SERVICE DELIVERY: (Inc. Customer Enquiry, Quotes and Order Processing, and Purchasing/Sub-Contracting)**

Evidence Witnessed during Assessment:

- QMP011 Customer Enquiry/Quotation procedure (Rev. 1 01/10/17)
- QMP012 Forecast Planning procedure (Rev. 1 01/10/17)
- QMP015 Site Mobilisation procedure (Rev. 2 01/10/17)
- QMP016 Service Delivery procedure (Rev. 1 01/10/17)
- QMP013 Purchasing procedure (Rev. 1 01/10/17)
- QMP017 Sub-Contract management procedure (Rev. 1 01/10/17)
- QMP019 Outsourced Processes procedure (Rev. 1 01/10/17)
- Service Delivery Records relating to:
  - > Legacy (Swap Out/Maintenance) Framework Agreement with VMS;
    - ~ Initial Enquiry (email): Project D010 HindHead - Repair (23/09/18)
    - ~ Review of Planning Board/Resource Tool
    - ~ Quote (24/09/18)
    - ~ PO 53777 (26/09/18)
  - > Project: BMJV M27 J4 to J7 (Awaiting Client Appointment)
    - ~ Invitation to Tender "ITT" (14/09/18)
    - ~ Receipt of ITT confirmation (14/09/18)
    - ~ Tender Submission (01/10/18)
  - > Project: BMJV M62 J10 to J12 (Job Won)
    - ~ Invitation to Tender "ITT" (25/04/18)
    - ~ Receipt of ITT confirmation (25/04/18)
    - ~ Tender Submission (27/04/18)
    - ~ Pre-award Meeting/Review with Client (23/08/18)
    - ~ Appointment Notification & Contract (10/09/18)
    - ~ Acceptance of Contract (11/09/18)
- Sub-Contractor Question: Rowarth Civils (13/04/18)

Organisations method for determining effectiveness:

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

Overview of Organisation Process and Conclusions:

The Customer Enquiry, Quotes and Order Processing consists of separate processes based upon the nature of the work to be undertaken. Both processes were sampled and found to be well managed with good evidence of documentation etc.

The organisation undertakes minimal purchasing/sub-contracting and as such processes are very basic, with most procurement activities undertaken via credit card purchases. Purchasing is divided into three categories (Equipment Hire, Materials, and Labour/Sub-Contract). Selection criteria for Equipment Hire and Materials is limited to specification, cost, and availability. Labour/Sub-Contract activities are facilitated via a Questionnaire that reviews competency, experience and insurance requirements. Performance monitoring of supply chain is managed via management review.

Planned objective:

Planned objectives have been fully realised/Planned results have been fully 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
22/11/2019	Nathan Chivers	08:30	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)	
			PROJECT MANAGEMENT and MANGEMENT OF SITE OPERATIONS	
			INFRASTRUCTURE & WORK ENVIRONMENT (Inc. Calibration etc.)	
			COMPETENCY, AWARENESS & COMMUNICATION	
		14:00	Closing Meeting	

- Report to be written off site and submitted by 08:00 next working day.
- Given the Friday finish time it is proposed to work through Lunch.

## Appendix: Your certification structure & ongoing assessment programme

### Scope of certification

#### FS 618313 (ISO 9001:2015)

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 9001:2015)

<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>	Continuing assessment (surveillance)
<b>Assessment reference</b>	8834592
<b>Assessment dates</b>	15/11/2018
<b>Audit plan (revision date)</b>	21/12/2017
<b>Deviation from audit plan</b>	No
<b>Total number of Employees</b>	9
<b>Effective number of Employees</b>	9
<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)

## Certification assessment programme

**Certificate number - FS 618313**

**Location reference - 0047529484-000**

		Audit1	Audit2	Audit3
Business area/location	Date (mm/yy):	11/18	11/19	11/20
	Duration (days):	1	1	1
STRATEGIC REVIEW		X		
CONTINUOUS ASSESSMENT			X	X
Opening Meeting (Review of previous non-conformances & company changes, etc.)		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
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	
SENIOR MANAGEMENT DISCUSSION				X
STRATEGIC REVIEW & 3 YEAR PLAN				X

## 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](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)

## 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.*