Assessment Report

INFRATEC-UK Ltd

Assessment dates	17/11/2022 (Please refer to Appendix for details)
Assessment Location(s)	Middlesbrough (000)
Report author	Nathan Chivers
Assessment Standard(s)	ISO 9001:2015

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Executive summary

The organisations management system continues demonstrate effective compliance with the requirements of ISO 9001:2015. Arrangements evidenced as part of the assessment are also effective in ensuring that company objectives are met in line with strategic direction of being a strategic provider of expertise and resources in the delivery of integrated highway solutions for infrastructure projects.

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

One minor non-conformance (2262044-202211-N1) has been identified during this audit relating to infrastructure and control of measuring equipment. No opportunities for improvement were observed

Based upon evidence observed during this audit 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.

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NCR summary graphs

Areas of the standard(s) where BSI recorded findings
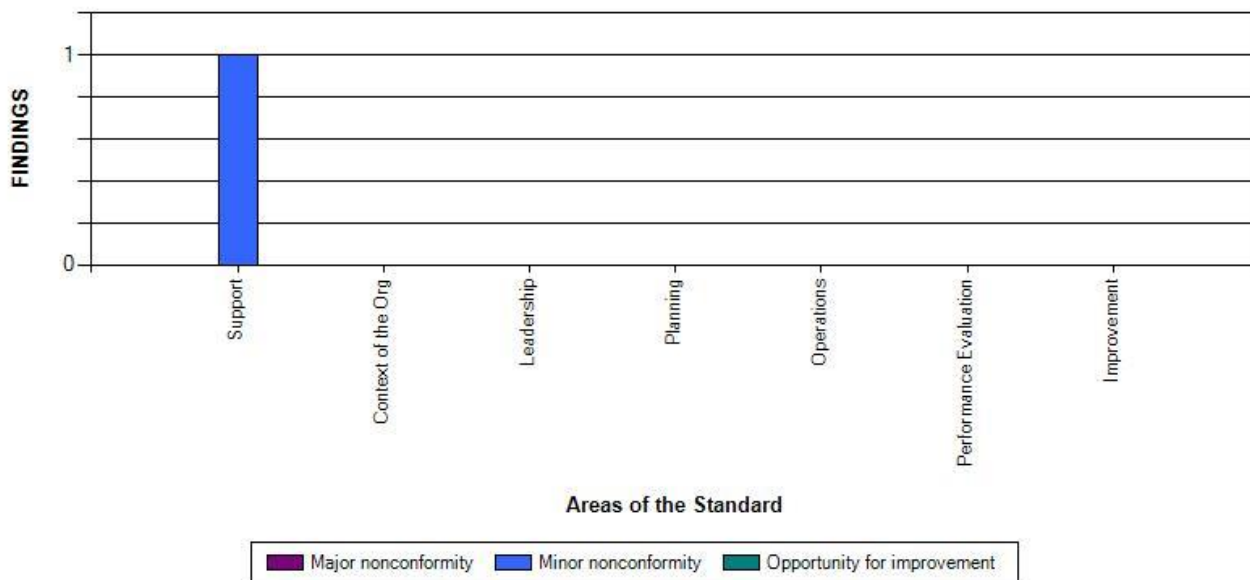
Which standard(s) BSI recorded findings against

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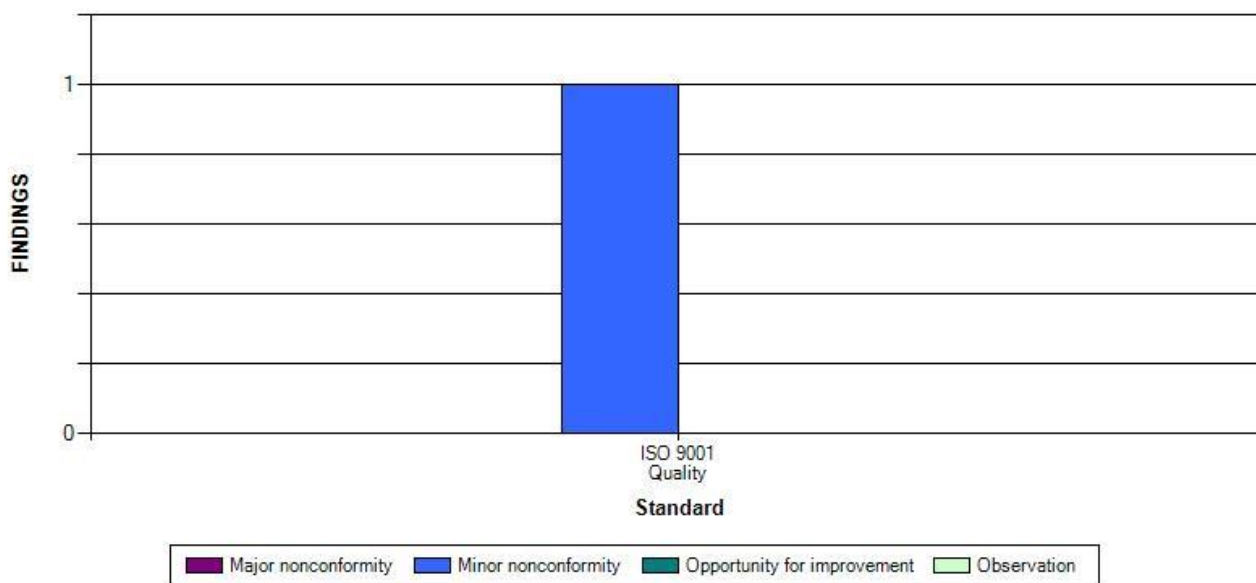
Your next steps

NCR close out process

There were no outstanding nonconformities to review from previous assessments.

A minor nonconformity requiring attention was identified. This, along with other findings, is 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.

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

Statutory and regulatory requirements

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

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Assessment participants

Name	Position	Opening meeting	Closing meeting	Interviewed (processes)
Lee Payne	Commercial Director	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 - Corrective Action Plan Required ('Minor' findings only): The audited organization may be recommended for 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 through the **BSI Connect Portal** detailing the nonconformity, the **root cause**, **correction** and your **proposed corrective action**, with responsibilities and **timescales** allocated. The plan is to be submitted no later than **02/12/2022**. If the corrective action plan is not received by this date you may be putting your certification status at risk.

For any questions please contact your local BSI office, referencing the report number 3331189.

Use of certification documents, mark / logo or report:
The use of the BSI certification documents and mark / logo is effectively controlled.

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Findings from this assessment

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:
- Company Process:
  > QMS001: QMS Manual (Rev. 6) 24/10/22)
    ~ Section 5: Quality Policy
    ~ Appendix A: Process overview
  > QMP002: Resource Management Process (v.2) 28/09/20)
  > QMP003: Measurement Analysis & Improvement Process (v.2) 28/09/20)
  > QMD002: Control of Documents (v.3) 28/09/20)
  > QMD003: Control of Records (v.3) 28/09/20)
  > QMD005: Change Management (v.2) 28/9/20)
  > QMD007: Management Reviews (v.4) 24/10/22)
  > QMD023: Internal Audits (v.4) 28/09/20)
  > QMD024: Corrective & Preventative Actions (v.3) 28/09/20)
  > QMD025: Complaints (v.2) 12/04/21)
- 2022 Strategic Company Objectives relating to:
  > Client satisfaction
  > Staff Professional Development
  > Improving Service Delivery & Performance [Process Efficiency through investment in equipment etc]
- Continuous Improvement Log
  > Used to support & tracking actions associated objectives & targets
- 6 Monthly Management Review:
  > 21/12/21 & 27/06/22
- Rolling 3-Year (36 Month) Internal Audit Log/Schedule:
  > Annual:
    ~ Service Delivery [Clause 8]
    ~ Resource Management [Clause 7]
  > 3-Yearly [36 Months]
    ~ Measurement Analysis & Improvement [Clauses 9 & 10]
    ~ Management Responsibility [Clauses 4, 5 & 6]
  > Internal Audit # 016: Service Delivery (inc. Sales, Forecasting, Project Delivery, Purchasing, Site Mobilisation and Service Delivery (25/07/22)
    ~ No non-conformances identified.
  > Internal Audit #15: Procedure of Procedural & Standard Changes (29/11/21)
    ~ No non-conformances identified.
  > Internal Audit # 014: Resources Management (Inc. Infrastructure, Competency, Calibration etc)
    ~ No non-conformances identified.
- NCR/CAR Register (Internal/External Audit, Complaints, Employee Feedback, etc.)
  > No internal Non-Conformances since last BSI assessment (Nov'21)
  > No Supplier Non-Conformances since last BSI assessment (Nov'21)
  > No Customer/Interested Party Non-Conformances
- Customer Feedback:
  > Weekly Operation/Planning Reviews that includes Operational Performance feedback
  > Trend analysis via Management Review

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The methods for determining effectiveness include:
Review of internal audits, records, key performance indicators (KPI's) & observation

Overview of Organisation Process and Conclusions:
Objectives: The organisation continues to utilise a three core thread of objectives and utilises the continual improvement log to identified actions associated with each strategic objective. The monitoring & tracking of these actions was well recorded.

Management Review: The organisation continues to utilise a 6-monthly management review strategy with all mandatory elements of management review being review at each event. Good attendance by the senior management team was noted.

Internal Audits: The organisation continues to utilise a 3-year (36 month) internal audit strategy with audit frequency of processes determined by risk and previous findings. All completed audits since the last BSI assessment were reviewed and found to be completed in a timely manner and were well documented.

Non-Conformance Management: Whilst there had been non-conformances since the last BSI audit, the organisation does maintain processes that if implemented in a timely and effective manner should result in the effective and timely resolution of non-conformances. There have been no customer complaints since the last BSI audit.

Document & Record Management: All requested documents were found to be readily available and subject to appropriate revision control. All requested records were readily available and through the use of digital cloud storage retention of records was demonstrated.

Continual Improvement: Activities associated with continual improvement were observed throughout the assessment.

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

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Project Management and Management of Site Operations:

Evidence Witnessed during Assessment:
- Company Process:
  > QMP001: Service Delivery (v.2) 11/12/20
  > QMP002: Resource Management Process (v.2) 28/09/20
  > QMP003: Measurement, Analysis & Improvement Process (v.2) 28/09/20
  > ???????: Customer Enquiry/Quotation (v.3) 11/12/20
  > QMD012: Forecasting/Planning Procedure (v.3) 11/12/20
  > QMD016: Service Delivery Procedure (v.3) 12/04/21
  > QMD018: Control Activities (relating to Service Delivery) (v.3) 11/12/20
- Records & correspondence associated to: Project SW003 (M4 J3-12: MS4/AMI Installation)
  > Client issued "provisional Programme of Works" and RFT (11/10/19)
  > Quote submitted (17/10/19)
    ~ Cost analysis supporting Quote (including fees& overheads etc)
  > Client appointment via PO 4500035201 (24/08/20)
  > Project Management Work File:
    ~ Key Contacts (Client, Principal Contractor, Sub-Contractors etc.)
    ~ Technical Query Log [None raised on this project]
    ~ Early Warning Events Register & associated Compensation Event Log
  > Weekly Planning Calls (& emails) with client (Client Build and Production Schedules)
    ~ WARBOARD Resource Tool/Planner reflecting all active projects
      ¬ Activities ongoing: Scheduled completion: End of 2022
      ¬ Last activities completed 24/08/22
  > Job Pack associated with works undertaken 24/08/22:
    ~ Lift & Installation Plan (RAMS's)
  > Various Site Visit Reports including Daily Site Reports and Work Package Sign Off records
- Records & correspondence associated to: Project SWO2201 (M56 Technology Installation)
  > Client issued "provisional Programme of Works" and RFT (22/04/20)
  > Initial Quote submitted (22/04/20) [Duplication of similar historic project]
  > Additional Works:
    ~ Podium Gantry Quote (13/07/22), Client Appointment via PO 4500041927 (23/08/22)
  > Project Management Work File:
    ~ Key Contacts (Client, Principal Contractor, Sub-Contractors etc.)
    ~ Technical Query Log [None raised on this project]
    ~ Early Warning Events Register & associated Compensation Event Log
  > Weekly Planning Calls (& emails) with client (Client Build and Production Schedules)
    ~ WARBOARD Resource Tool/Planner reflecting all active projects
      ¬ Podium Gantry Works
  > Job Pack associated with works undertaken 22/08/22:
    ~ Lift & Installation Plan (RAMS's)
  > Site Visit Report (22/08/22) for Podium Gantry work

The methods for determining effectiveness include:
Review of internal audits, records, key performance indicators (KPI's) & observation

Overview of Organisation Process and Conclusions:
Activities associated with the management of enquiries (and the creation and submissions of quotes/proposals), the management of site works and delivery of projects was found to be well defined and through sampling of project records and associated correspondence effective implementation of planned arrangements was demonstrated.

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

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Competency, Awareness & Communication:

Evidence Witnessed during Assessment:
- Company Processes:
  > QMP002: Resource Management Process (v.2) 28/09/20
  > QMD008: Training Procedure (v.2) 28/09/20
- Employee Training Matrix
- Employee Competency Profiles (including Competency Cards & Training Records) for:
  > Employee: DL (HERS: Approved Person)
    ~ ALLMI Lorry Loader (Expires: 02/07/26)
    ~ Slinger/Signaller (Expires: 06/06/27)
    ~ HERS ECS Card Expires: 05/11/24
  > Employee: LR (HERS: Supervisor)
    ~ ALLMI Lorry Loader (Expires: 02/07/26)
    ~ IPAF - 3B, 3A & 1B (Expires: 31/10/27)
    ~ Slinger/Signaller (Expires: 31/05/27)
    ~ Crane Lift Supervisor (Expires: 31/05/27)
    ~ HERS ECS Card Expires: 04/12/24
  > Employee: SC (HERS: Approved Person)
    ~ Slinger/Signaller (Expires: 06/07/27)
    ~ HERS ECS Card Expires: 05/11/24
- Internal Communication via Tool Box Talks, Company Notice Board & Pre-Work Briefings
For External Communication please refer to "Project Management and Management of Site Operations" elsewhere within this report.

The methods for determining effectiveness include:
Review of internal audits, records, key performance indicators (KPI's) & observation

Overview of Organisation Process and Conclusions:
Processes associated with employee competency etc continue to be fulfilled through the use of the HERS portfolio scheme which is industry mandated. Effective implement of the HERS portfolio/competency scheme was observed. Processes associated with employee communication was found to be effective and suitable.

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

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Infrastructure & Work Environment:
(Including: Planned Preventative Maintenance and Management of Measuring Equipment)

Evidence Witnessed during Assessment:
- Company Processes:
  > QMP002: Resource Management Process (v.2) 28/09/20
  > QMD009: Preventative Maintenance (v.3) 28/09/20
  > QMD010: Calibration Procedure (v.3) 28/09/20
- Use of Microsoft Cloud Technology for Data Backup
- Calibration Log:
  > Fluke 1652C Multi-meter (Serial # 2818051)
    ~ Calibrated: 22/02/22 (Certificate: STD171801 (Calibration Frequency: 12 Months)
  > Wera Click-Torque C3 (Serial # VE15370)
    ~ (OEM Declaration of Performance: 10/11/21 (Calibration/Replacement Frequency: 12 Months)
  > Wera Click-Torque C3 (Serial # VG16872)
    ~ (OEM Declaration of Performance: 10/11/21 (Calibration/Replacement Frequency: 12 Months)
- Asset Register via Fleetio IT Platform
  > Statutory Inspections and Service Requirements & History for Fleet
    ~ MAN400 TGS
    ~ VOLVO FH540
    ~ SCANIA R500 (FASSI Crane weekly checks not being completed/documented)
    ~ VW Transporter

The methods for determining effectiveness include:
Review of internal audits, records, key performance indicators (KPI's) & observation

Overview of Organisation Process and Conclusions:
Whilst work environmental and infrastructure was general found to be well controlled and effective several minor deviations were observed relating to calibration of measuring equipment and verification of key assets/plant. Minor non-conformance 2262044-202211-N1 has been identified.

Planned objective:
Based on a sampling process and the objective evidence above planned activities & results have been partially achieved with one minor non-conformance identified.

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Minor (1) nonconformities arising from this assessment.

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)		
Statement of non-conformance:	Processes associated with the provision and availability of assets required to undertake planed works could not be demonstrated as being fully effective.		
Clause requirements	General The organization shall determine and provide the resources needed for the establishment, implementation, maintenance and continual improvement of the quality management system. The organization shall consider: a) the capabilities of, and constraints on, existing internal resources; b) what needs to be obtained from external providers.		
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			
Correction/containment			
Corrective action			

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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 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.

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Next visit plan

Date	Auditor	Time	Area/process	Clause
21/11/2023	Nathan Chivers	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)	
		10:30	CORE MANAGEMENT SYSTEM ACTIVITIES: (Including: Objectives, Management Review, Internal Audits, Customer Satisfaction/Complaints, Non-Conformance & Corrective Action, Document & Record Management, and Continual Improvement)	
		12:30		
		13:00	STATUTORY/REGULATORY OBLIGATIONS	
		13:30	SENIOR MANAGEMENT DISCUSSION	
		14:00	STRATEGIC REVIEW & 3 YEAR PLAN	
		15:00	Report Preparation	
		16:00	Closing Meeting	

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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	Continuing assessment (surveillance)
Assessment number	3331189
Assessment dates	17/11/2022
Audit plan (revision date)	25/11/2021
Deviation from audit plan	No
Total number of Employees	31
Effective number of Employees	16
Scope of activities at the site	Main certificate scope applies.
Assessment duration	1 day(s)

Shift details

The shift patterns within the organization rotate on a regular and frequent basis ensuring that a representative sample of shifts and appropriate staff are interviewed and seen over the certification cycle.

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

Business area/location		Audit1	Audit2	Audit3	Audit4
	Date (mm/yy):	11/20	11/21	11/22	11/23
	Duration (days):	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	
STATUTORY/REGULATORY OBLIGATIONS					X
SENIOR MANAGEMENT DISCUSSION		X			X
STRATEGIC REVIEW & 3 YEAR PLAN		X			X
Impartiality Review			X		

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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.

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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/

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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.

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