

Cert Ref Number	11760	Visit No	0	Date(s)	04/01/2021 09:00 - 06/01/2021 17:00
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## MANAGEMENT SYSTEM AUDIT REPORT

Cert Ref Number:	<b>11760</b>	Audit Date(s):	<b>04 - 06/01/2021</b>	Duration:	<b>3</b>	Visit Number:		
Standard(s) audited:	<b>ISO 9001:2015</b>			Type of audit:	<b>Stage 2</b>			
Audit is combined, integrated or joint:	<b>No</b>			Shift System:	<b>No</b>			
Organisation:	<b>Pure Utility Solutions Ltd</b>							
Address:	<b>Main Office, 701 Clock Face Rd, Clock Face, Saint Helens , WA8 3XX</b>							
Tel:	<b>0741 123 4246</b>	Email:	<b>stuart@provenza.co.uk</b>			Web:	<b>https://www.pureus.co.uk/</b>	
Representative(s):	<b>Stuart Malem, Cathy Moon</b>		Staff:	FT	<b>30</b>	PT	Effective:	<b>0</b>
Locations & Permanent or Temporary Site(s) visited:	<b>See section 13 &amp; 14</b>			EAC Code(s):	<b>28c</b>			
Lead Auditor:	<b>Peter Sanderson</b>		Additional Team Member(s):					

Scope as it will appear on certificate:	<b>The provision of drainage services and general building maintenance</b>
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**Audit Objectives:** Auditors PLEASE NOTE also see QP-06 for additional objectives which shall be shared with the client for a fuller understanding of the audit

The objectives of the audit are:

- To confirm that the management system conforms with the requirements of the audit standard
- To confirm that the organisation has effectively implemented the planned management system
- To confirm that the management system is capable of achieving the organisations policy objectives
- To evaluate the ability of the client's management system to meet any statutory, regulatory or contractual requirements
- To identify any areas of potential improvements for the client

**Audit Programme:** - Confirm the audit programme with the client. Inform APPROACHABLE CERTIFICATION HQ if changes required.

Report submitted to and accepted by:	<b>Chris Caine Stuart Malam</b>	Position in Organisation:	<b>Business Manager ISO Consultant</b>
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Report prepared by:	<b>Peter Sanderson</b>	Lead Auditor
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Date(s) of Next Visit:	<b>*October 2021 -</b>	Start Time:	<b>9.00</b>
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Surveillance visits set at:	<b>**1</b>	Per year of	<b>**2</b>	Days per visit
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**NB If the next visit is a Recertification Visit additional days over and above the surveillance days may be required.**

**The Organisation agrees to comply with APPROACHABLE CERTIFICATION's Rules of Registration**

**For the latest version of the Rules, please follow the link below:**

**<http://approachable.uk.com/rules-of-registration/>**

\* Please see Audit Plan for details of the next visit

\*\* Enter details in section 2 if days or pattern of days has changed

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This report is confidential, and its distribution will be limited to the audit team, client representative and APPROACHABLE CERTIFICATION office

## 1 Audit Conclusion

The audit team concludes that the organisation **HAS** established and maintained its management system in line with the requirements of the standard(s) and demonstrated to the audit team that it can systematically achieve the requirements for products and or services within the scope of its activities and in accordance with its policy and objectives.

The audit team recommends that based on the evidence obtained during this audit that Certification should be:

Recommended  Continued  Deferred

Improvement Requests

Number of Improvement Requests raised Major  Minor

### Where Improvement Requests are raised

- For Initial Audits, Extensions to Scope and Recertification Audits; Improvement Requests must be closed out before a Certificate is authorised for issue and **can only be closed out** either by submission of evidence to APPROACHABLE CERTIFICATION or a re-visit to audit the corrections (**see Improvement Request section of this report**).
- For Surveillance Audits any Improvement Request **classified as Major can also only be closed out** either by submission of evidence to APPROACHABLE CERTIFICATION or a re-visit to audit the corrections (**see Improvement Request section of this report**).

NB All Improvement Requests **must be actioned** within the agreed timescales.

Please Note the recommendation is provisional and subject to review by APPROACHABLE CERTIFICATION's Certification Review Team.

## 2 Significant Organisational Changes (also include any changes to justified exclusions and any change to surveillance visit patterns e.g. if additional standards have been added). **Include any significant changes to the stage 2 audit plan produced at stage 1.**

Statement on the conformity and effectiveness of the management system (see item 1) together with a summary of the evidence to confirm the following:

- The capability of the clients' management system to meet requirements and expected outcome
- effective systems are in place
- The internal audit and management review process (see item 9)
- audits and reviews have been undertaken
- Conclusion of the appropriateness of the scope
- The scope reflects the business activities
- Confirmation that Approachable Certification's audit objectives have been fulfilled.
- The objectives of this assessment have been met.

## 3 Observations and Opportunities for Improvement

- Management of resources
- Arrangements of Infrastructure and subcontractor control.
- Positive attitude to standard and certification
- Good Management and loyal workforce

OBS: the Quality Manal makes reference to Calibration being excluded, however calibration is still manged via hire arrangements.

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**NOTE: -Please ensure the audit date is noted for each area audited if the audit duration is more than one day  
Please ensure that the location of the audited area is noted if different to the client's Head Office and detail the site**

**4 Context of the organisation Also include in this section any additional requirements of the standard(s), sector scheme, legislation etc.**

**Current Structure**

30 employees Structures identified on the organisation chart

**4 Understanding of Organisational Context (External & Internal)**

Evidence is available on interview with CC (Business Manager) and SM (QMS Consultant) in relation to the context of the organisation.

The Company has determined the processes and their interactions in order that it can deliver the outcomes that customers expect and that meet its environmental, legal, regulatory, commercial and social responsibilities. The sequence and interaction of these processes are shown in the Management System Manual.

Pure Utility Solutions are based in the North West and are a provider of drainage services and general building maintenance to industrial and commercial clients across the UK.

**Understanding the needs and expectations of interested parties**

Evidence is available on interview with CC (Business Manager) and SM (QMS Consultant) in relation to the context of the organisation in relation to the needs and expectations of interested parties. The Company has undertaken a process of identifying the relevant interested parties affecting, and affected by, the Company and its MS (9001). Their needs and expectations have been considered in the process of identifying the risks and opportunities that may affect the Company.

Interested parties relevant to the MS have been recorded. Relevant interested parties have been identified and their needs and expectations determined as follows:

Internal Employees	Continued employment
Safe working environment	
Customers	
Reliable service	
Compliance with requirements	
Compliance with contract	
Meeting KPI's	
Certification Body (ISO9001)	Compliance with ISO9001 requirements
DVSA	Vehicles are safe to drive
Environment Agency	Compliance with Environmental Legislation
HSE	Legal requirements regarding Health & Safety are being complied with
The Bank	Satisfactory financial results
Insurance Company	Compliance with Policy conditions

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Internal Shareholders (owners)      Turnover Profitability  
 Service and quality of work

### Confirmation of scope

The provision of drainage services and general building maintenance

Justified exclusions

- 8.3      Design cannot be applied to any of the processes within the scope of the QMS
- 7.1.5    There is no measuring or test equipment requiring calibration.

OBS: the Quality Manal makes reference to Calibration being excluded, however calibration is still manged via hire arrangements.

### 5 Leadership

Leadership and customer focus is evident throughout the organisation with a commitment to 9001:2015 and the customer demonstrated through interview. The current management system documents commitments and customer focus.

### Quality Policy

The policy is available and meets the requirements of ISO 9001:2015 and has been communicated as determined in the standard.

### Management System documentation

The organisation operate a Quality Manual dated 01/09/2020 Rev 0 which contains:

Section	Title
1	Contents & Amendment Record
2	System Structure
3	Quality Policy
4	Organisation
5	Process Interaction and Exclusions
6	Interested Parties

It is supported by a Procedures Manual dated 01/09/2020 Rev 0 which contains:

1	Contents & Amendment Record
2	Product Realisation
3	Document and Data Control
4	Internal Audits and Management Review
5	Management of Change
6	Control of Nonconformance
7	Control of External Providers
8	Control of Inspection and Measuring Equipment
9	Training

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## 6 Planning (Risks, opportunities, objectives)

Considerations have been made for the risk and opportunities within the business in relation to the organisation Interview with IL (Director) and SM (QMS Consultant). This is to be followed up at stage 2.

Quality Management System Manual dated September 2020 refers with the support of Business Risk Assessment.

Loss of a member of the SMT Key business functions will not be carried out

Loss of staff      Inability to meet customer requirements

Pandemic inability to meet customer requirements

GDPR      Time taken to rectify the issues

Reputational damage

BREXIT      Unclear as yet

IT / Telecoms Failure

Inability to contact customers

Loss of business      Loss of income

Commitment to customer satisfaction

KPI's monitored to ensure service levels met

Regular performance meetings with customers

Broad customer base

Equipment

Breakdown

Loss of resource

Inability to meet customer req's.

Reputational damage      Maintenance carried out

Fire or flood

Loss of facility

### Risk and Objectives

Actions to address risks and opportunities have been discussed and determined within the organisation, the management system has been newly established. Objectives are looking at growth and potential new customers. High risk identified sales and growth, environmental concerns, new client's downturn in spending. Mitigation taken place to address risk such as control of costs,. Sales risk and commercial risk discussions are in depth and recorded. Risk rating/Mitigation/control and residual details available for review.

Risks identified and controlled by means of objective to reduce the risks, Risks and Objectives are linked and referenced to one another, responsibilities targets and timescales identified. To be reviewed further at stage 2.

1-5 Insignificant

6-10 Low

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11-15 Medium

16-20 High

21-25 Very High -

## 7 Support

### Support Resources

Organisational roles, responsibilities and authorities have been documented within the of the management system and details the role of the Director and the management representative. An organisation chart is available and up to date.

### Monitoring and measuring resources

Monitoring and measuring of resources is available by means of:

Review of training matrix

Management Review

Internal audit

Data collation including customer KPI

ASDA 2020 to date	
Response time	91.8%
Repair time	90.9%
First fix	98.7%

### Infrastructure

The organisation infrastructure operates occupying various rooms from a shared access building. The office New Fire Alarm arrangements are being considered at this moment. Fire service equipment is current and PAT Testing complete. People interviewed were knowledgeable with regards to the management system which had been communicated via staff meetings and approx updates with regards to procedural changes, the building has been modernised and is light and airy with good staff facilities and a meeting/boardroom on the first floor. All staff have access to the data base system and are in constant communication with each other. The environment is one of pleasant communication with good working practices.

### Documented Information with Control of Documents and Records and version control

Record retentions defined as between 3 & 7 years, changes to the system controlled through issue status, change control verified, data backup defined and checked, background anti-virus installed. There have been 0 changes to the current management system since the last audit. A procedure is available along with a flowchart in relation to documented information. Documents are established with revision and issue control. Documents are produced to meet standard requirements. All documents are reviewed before approval and the control index is signed to approve the document. A register is maintained for all external documents and documents are issued to relevant locations/persons. If a document becomes obsolete these are correctly identified to prevent accidental use.

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## 8 Operations

The management system refers to operational planning and control with various flow charts identified' Job Management process is documented within the QMS. An enquiry or a request for a quotation is received and reviewed to determine if the prospect meets the company's acceptable profile e.g. location, suitable margin, available services etc. Service costs are analysed and priced accordingly, giving consideration to delivery costs and any other requirements. Proposal is then submitted to the customer.

Various contracts could be viewed from the business information regarding enquiries and confirmed orders were recorded on the company's electronic system which obtains all information related to the specific Job. It gives each job a unique reference number. Following the initial enquiry, each job is then given its own job reference number; additional documentation/information is also retained in hard copy files (contractual arrangements).

No areas of concern were noted and the process met the requirements of both company procedure and the standard with all enquiries, acknowledgements, reviews available on email with records of orders available. A sample of Enquiries and Orders and completion of tenders were taken, including:

### Tenders and contracts, Process control, work methods

#### PPM Works

##### Asda Bishopbriggs – Scheduled Job ID – 4864 - City FM – Pumping Station

Confirmation of works – 29/12/2020

Site Risk Assessment Method Statement available

Works Allocated and complete (IL)

#### PPM Works

##### Asda Colindale – Scheduled Job ID – 6563 - City FM – Pumping Station

Confirmation of works – 29/12/2020

Site Risk Assessment Method Statement available

Works Allocated and complete (MH)

#### Reactive Works

##### Asda Newport – Scheduled Job ID – 4816 - City FM – call Out

Confirmation of works – 21/12/2020

Site Risk Assessment Method Statement available

Works Allocated and complete (TB)

#### Site Visit - Job PU18859

##### Redrow Homes

Jetting and vacuum

Job PU18859

Vehicle NV70 DCE

On Site Employees MA & MO

RAMS signed 06/01/2021

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All PURE field operations staff signed into site and fully briefed on main hazards of the day.

Full scope of work including RAMs discussed prior to work starting on site.

RAMs also signed off by PURE field operations and PURE senior management.

All PURE field operations staff wearing the correct PPE, including face masks

Safe working barriers and beacon displayed in working area on site.

All tools and equipment in excellent condition and calibrated

Vehicle inspection completed prior to attending site.

A1 Customer feedback obtained on progress so far.

### **Training, competency and awareness**

The management system refers to Awareness with inductions being carried out.

Employees made aware of company policies, relevant hazards/risk assessment procedures, welfare and first aid/emergency procedures, objectives and targets relating to their role, job related processes and procedure and importance of commitment to achieving objectives and continual improvement. Training reviewed for:

MA – Operative

PDL – Building Manager

RO Operations

Mike Miskell Accounts Assistant

VT Admin

Training records were relevant to roles and uptodate, examples included.

AAT Level 2 and 3 / CoSHH / Manual Handling / Fire Handling / WAH / DBS / CSCS / SMSTS / SMSTS refresher / CSCS Gold / Emergency First Aid At Work / IPAF / PASMA / Asbestos Awareness (Cat A) / ECS / C&G signing

### **Sales order process**

#### **Communication and awareness**

#### **Purchasing and approved suppliers**

Purchasing of materials is limited and remains well organized by means of sage controls. The principal control for purchasing is by means of telephone orders delivered to HO. Only approved suppliers are used and materials are called up by requirements related to contract specification. Purchased products are verified on delivery through delivery inspection notes signed off. Purchasing is carried out in accordance with the company procedures. Suppliers were reviewed at last Management Review Meeting with no issues raised. The following Purchased items were identified and followed through accordingly.

## **9 Performance Evaluation**

### **Management review**

Management Review has been carried out on 11/12/2020 and attended by:

Stuart Malem      Consultant

Chris Caine      General Manager

Cathy Moon      Financial Controller



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Robert Ormrod Business Support Manager

#### **Inputs -**

Review of previous meetings  
 Internal & External Changes which impact the management system  
 Business Risk and Opportunities / SWOT Analysis  
 Needs & Expectations of interested parties  
 Performance and effectiveness of the management system  
 Customer satisfaction, complaints and concerns  
 Objectives & KPI  
 Internal / External Resourcing  
 Supplier Status

#### **Outputs –**

Improvements opportunities  
 Quality Objectives & KPIs

#### **Quality objectives**

Quality objectives have been monitored throughout 2020 and interact with the organisation risks and opportunities planning. These are documented within the Management system and have been reviewed at the last management review.

Evidence is available and discussed on detail how data is collated and analysed.

Streamlining the business processes  
 Increase business levels with United Utilities  
 Achieve registration to ISO9001: 2015

#### **Internal Audits**

##### **Internal Audit Schedule**

An internal audit schedule is available for 2020 and covers all sections of the management system and the requirements of ISO 9001:2015. The Audit schedule also covers all sections of the current management system.

##### **Internal Audits**

Internal Audits have been carried out in accordance with the audit schedule and remains up-to-date.

##### **Non-Conformances and Corrective Actions (including root cause)**

There have been 0 recorded NCRs during 2019

##### **QMS Effectiveness Check**

QMS Effectiveness checks are carried out as part of the internal audit / management review schedule – refer to internal audits.

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### Continual Improvement

Improvements shown by KPI's linked to objectives and demonstrated through Management Review

#### 11 Follow Up of Previous Audit Results

Previously raised Improvement Requests have been effectively closed out **YES NO N/A**

If **No** what corrective action(s) has been implemented (if any):

Re raised as Major/Minor

#### 12 Activities planned but not covered on this visit and require planning for the next visit.

Date	Process/Department/Activity/Site Visit etc.	Auditor
N/A	N/A	N/A

#### 13 Head Office/Locations/Branch Offices visited during this audit

Date	Location	Auditor
4/6 – 01/2021	Head Office (Remote Audit)	PS

#### 14 Client/Contract Sites/Temporary Sites visited during this audit (if applicable).

Date	Location & Activity Audited	Auditor
5/1/2021	Site Visit	PS

#### 15 Registration Marks

Use of Registration Mark is in accordance with the Rules of Registration (**check** YES/NO   
**printed material and website**)

Check and give brief details of where the UKAS registration mark and Approachable Logo is used:	<input type="text"/>
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The audit methods used were interviews, observation of activities, review of hard copy documentation, review of documentation retained electronically and a review of records. The conclusion is based upon the evidence obtained during the audit. The auditor(s) used standard sampling techniques to obtain this evidence and no guarantee can be given that a different conclusion may have been reached had different samples been taken.

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### AUDIT PLAN NEXT VISIT

#### The objectives of the audit:

- To confirm that the management system conforms with the requirements of the audit standard and also any statutory, regulatory and contractual requirements that are applicable
- To confirm that the organisation has effectively implemented the planned management system
- To confirm that the management system is meeting its specified objectives

#### Audit criteria:

- Documents, procedures and policies relevant to the standard being audited will be required.
- The audit will be performed against the scope of activities agreed at the opening meeting.
- The audit will be conducted at the locations identified on this audit plan.

Lead Auditor	Peter Sanderson	Additional (Auditor/Expert/Observer)	N/A
Standard(s)	ISO 9001:2015	Type of audit	S1
Audit Dates	October 2021	Location(s)	Head Office
Audit Start Time	9.00	Does Client need to confirm site visit with APPROACHABLE CERTIFICATION Head Office prior to next visit <b>YES/NO</b>	Yes
Audit Language (if not English)	N/A	Is Recertification Planning Required <b>YES/NO</b>	No

Date	Time	Area/Department/Functions/Process/Aspects/Activities	Auditor
Day 1	9.00	<b>Opening Meeting including review of previous report (Stage One, Surveillance) &amp; confirmation of scope</b>	PS
		<b>Site Visit</b>	
	16.00	<b>Review off Day 1</b>	
Day 2	9.00	<b>Context of the Organization;</b> Interested Parties, Scope including non-applicable sections Process Interactions.	
		<b>Leadership and Commitment;</b> Policy Statement, Organizational roles, responsibility and authority, Customer Focus	
		<b>Planning;</b> Risks and Opportunities, Objectives, Environmental aspects, Compliance Obligations.	
	12.30	<b>Lunch</b>	
		<b>Support;</b> Monitoring and measuring of resources and Management traceability (Calibration/Verification) Competence, Awareness, Communication, Documented Information, Organizational Knowledge	
		<b>Performance Evaluation;</b> Monitoring, measurement, analysis and evaluation, Customer Satisfaction ( <b>9001:2015 only</b> ) Internal Audit, Management Review, Evaluation of Compliance	
		<b>Improvement;</b> Non-conformance and Corrective Action, Continual Improvement.	
		<b>Review day 2</b>	
		<b>Follow up of site visit</b>	
		<b>Operation Activities</b>	
		1 Contents & Amendment Record	
		2 Product Realisation	
		3 Document and Data Control	
		4 Internal Audits and Management Review	
		5 Management of Change	
		6 Control of Nonconformance	
		7 Control of External Providers	
		8 Control of Inspection and Measuring Equipment	
		9 Training	
	15.00	<b>Report Writing</b>	

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	16.00	<b>Closing meeting</b>	
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**Locations/Branch Office Visits**

Date	Time	Process/Aspects/Activities etc. to be Audited	Auditor
TBC	9.30	Head Office	PS

## Note to Lead Auditor

Refer to 3-year Audit plan and last Audit plan when producing the audit plan for the next visit

Ensure that all clients' locations/branches are visited in accordance with the 3-year audit plan

Ensure client fully understands the cancellation policy stated above.

Ensure that site activities are witnessed as appropriate and in accordance with the 3 Year Audit plan

All Management System Elements must be audited once per year as a minimum

Review the 3-year audit plan and if appropriate and necessary amend the plan

Signed Lead Auditor:	Peter Sanderson	Date:	6 <sup>th</sup> January 2021
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Reviewed by	Jim Eaton	Date:	22/1/2021
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**FOR AUDITORS USE ONLY**

**If the time allocated is not correct the auditor must inform APPROACHABLE CERTIFICATION and record the details on page 2 of this report**

**Auditors to use relevant Guidance Documents and information on the audit checklist to focus sufficiently on critical areas during the audit.**

**Auditors to meet at least each lunch time and prior to the closing meeting to review the programme and findings of the audit.**

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## AUDIT PLAN COVERING THE 3 YEAR ASSESSMENT CYCLE

Organisation Name Pure Utility Solutions Reference Number 11760

This plan commences:

- On the date of the first surveillance visit following the initial audit (stage 2) or;
- On the date of the Surveillance Audit following the Re Certification Audit;
- At the next surveillance visit if the plan requires amending or to consider extensions to scope.

	Visit 1	Visit 2	Visit 3
	Oct 21	Oct 22	Oct 23
	9001	9001	9001
<b>Month and Year</b>			
<b>Standard(s)</b>			
<b>Number of Days</b>	2	2	3
<b>Area/Function/Process/Activity/Site Visits (temporary sites) etc.</b>			
<b>Context of the Organization;</b> Interested Parties, Scope including non-applicable sections Process Interactions.	X	X	X
<b>Leadership and Commitment;</b> Policy Statement, Organizational roles, responsibility and authority, Customer Focus	X	X	X
<b>Planning;</b> Risks and Opportunities, Objectives, Environmental aspects, Compliance Obligations.	X	X	X
<b>Support;</b> Monitoring and measuring of resources and Management traceability (Calibration/Verification) Competence, Awareness, Communication, Documented Information, Organizational Knowledge	X	X	X
<b>Performance Evaluation;</b> Monitoring, measurement, analysis and evaluation, Customer Satisfaction <b>(9001:2015 only)</b> Internal Audit, Management Review, Evaluation of Compliance	X	X	X
<b>Improvement;</b> Non-conformance and Corrective Action, Continual Improvement.	X	X	X
<b>Operation Activities</b>	X	X	X
1 Contents & Amendment Record			
2 Product Realisation			
3 Document and Data Control			
4 Internal Audits and Management Review			
5 Management of Change			
6 Control of Nonconformance			
7 Control of External Providers			
8 Control of Inspection and Measuring Equipment			
9 Training			
Report Writing	X	X	X
Closing meeting	X	X	X

### Head Office/Locations/Branch Offices Visit Plan

	Visit 1	Visit 2	Visit 3
<b>Head Office</b>	X	X	X
Site Visit	X	X	X

Indicate with a **X** when audit of this function planned or when a visit is planned.

When producing this plan ensure that all clauses of the standard (s) can be attributed to Area/Function/Process/Activity/Site Visits (temporary sites) and are audited over the 3-year Recertification Cycle.

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The clients Locations/Branch Offices must also be appropriately sampled over the 3 Year Certification Cycle.

Plan Produced By  Date

Plan Amended By  Date

Plan Reviewed By  Date

### Opening & Closing Meeting Attendees

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Time (Opening Meeting)	9.00	Time (Closing Meeting)	16.00
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Name	Job Title	Opening Meeting (Initials)	Closing Meeting (Initials)
Chris Caine	Business Manger	CC	CC
Stuart Malem	ISO Consultant	SM	SM
Peter Sanderson	Lead Auditor	PS	PS

### Opening Meeting Agenda

- Introduce audit team including any trainees, observers, subcontractors or accreditation staff (ask the client if they have any objections, if so contact head office immediately), including their roles and record the client's representatives attending the meeting. The auditee may act as a guide, if required
- Confirmation of the status of the findings from the previous audit or review if applicable
- Confirm that all members of the audit team representing Approachable Certification Ltd are responsible for the audit and are in control of all audit activities, trails and execution of the audit plan
- Confirm audit plan, standard, objectives and scope of audit. Discuss any changes to the audit plan, as required, and confirm the date and time of the closing meeting and schedule any interim meetings necessary. Discuss and record any statutory, regulatory or contractual requirements of the client
- Discuss the needs for guides and their roles, also any observers who the client wishes to be present. Confirm communication channels between the audit team and the client and that the client will be kept informed of the audit progress
- Explain that the audit will be a sampling process
- Explain minor/major deficiencies and that an audit report will be produced for the client with certification recommendations
- Discuss actions to be taken in the event of a non-compliance identified during the audit. Explain that the audit may be terminated after discussions with the client and Approachable Certification, if a major non-conformance is identified or for safety reasons
- Confirm confidentiality and language of the audit
- Ask for private room to be made available and discuss lunch arrangements
- Please ask the client to explain health & safety and security requirements, if releavnt
- Invite attendees back to the closing meeting
- Ask the client to verify legal company name (which will appear on their certificate)
- Establish any impartiality issues about the audit and specifically that the auditor has no links with the company or a commercial relationship, with the consultant (if present). **If any such risk to impartiality exists, the auditor must contact the office for guidance**
- Ask if the company have any questions with regards to the content of the opening meeting.

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## Closing Meeting Agenda

- *Record representatives attending the meeting*
- *Offer thanks for hospitality*
- *General comment on the effectiveness of the Management System*
- *Report any deficiencies (with close-out timescales) and explain major & minor NCR's and the consequences of each to the certification recommendation. Advise the client that the audit evidence collected was based on a sampling procedure and therefore there may be other discrepancies not identified,*
- *Give audit recommendations and the method of reporting and give the client representatives ample time for questions regarding the audit. Any unresolved issues are to be referred to Approachable Certification*
- *Mention any good practices identified during the audit*
- *Confirm the scope of audit*
- *Explain that addressing any non-conformance must include a full root cause analysis which will be reviewed for its effectiveness*
- *Explain confirmation of Addressing Corrective Action Form, discuss with the client the need to close out minor non-conformances within three months, otherwise these will be upgraded to a major*
- *Explain to the client that all non-conformances must be satisfactorily closed out for all initial, recertification and extension to scope audits before a file can be submitted for a certification decision*
- *Explain that the report will be forward to Approachable Certification Ltd HQ within 5 days for final review. The certification decision will then be made after close-out of any NCR's for initial, recertification and extension to scope audits. For surveillance audits, minor NCR's will be reviewed at the next visit, major NCR's raised need to have appropriate evidence sent to Approachable Certification Ltd HQ by the client or may require a further visit for close-out*
- *Inform client about Approachable Certification Ltd complaint handling and appeal procedures*
- *Set date and competent auditor for next visit if possible, or inform client that Approachable Certification Ltd will contact them 3 months prior to arrange a date*
- *Briefly describe other areas of Approachable Certification Ltd activities*
- *Discuss Approachable Certification Ltd Website and access to customer services, e.g. training, questionnaires etc.*
- *Encourage client to complete customer survey online.*