MANAGEMENT SYSTEM SURVEILLANCE AUDIT REPORT



Client's Name: UNIVERSITY OF SOUTHAMPTON

Report No. 528659

Date of opening meeting: 11/11/2019

Applicable standard(s): ISO14001:2015

This report has been prepared by:

NQA Assessor: Mario M Terol

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nqa. Audit Report Part A - Executive Summary

Client Information

Primary Contact:	Nicola Turvey	
Address:	Highfield, , Southampton, SO17 1	BJ GB
Contact Tel:	02380 596 679	
Contact E-Mail:	N.S.Turvey@soton.ac.uk	
Billing Contact:	As above	
Billing Tel:	As above	
Billing E-Mail:	As above	
System integration	(integrated audits only):	N/A
Additional information on integration if required:		N/A
Certificate expiry d	ate(s):	7/08/20
Required changes t	o EAC or NQA Codes applied:	No changes required

	At this location	Across all locations (Multisite)
Total Employees	5.500	
Repetitive or parallel workers		
Energy Engaged Employees		
Energy Consumption		
Energy Uses		
Energy Sources		

Energy data only applicable for ISO 50001 audits. Further guidance available in ASR 47:2.1

The date of the next audit is:	06/07/2020

Version 20 Page 2 of 29

Report No.	528659
Date:	11/11/2019



nqa. Audit Report Part A - Executive Summary

Audit Information

Audit Duration (in days): 3 days/man

Scope of certification: Scope is appropriate.

Confirmation that audit objectives have been fulfilled: All objectives met.

If no, which objectives have not been met.

Note that customers with installation/service activities within their scope must receive a minimum of one on-site visit once per cycle. Failure to achieve this may result in this activity being removed from the client's scope of certification.

NQA Audit Team		Client	Position	Attendance
Lead Assessor Mario M Terol		Nicola Turvey	Sustainability Manager	Opening and Closing
Member 1		Adam J. Tewkesbury	Assistant Director of Transport & Sustainability	Opening and Closing
Member 2		Maurice Woodcock	Director for Estate Operations	Closing
				Choose an item.
				Choose an item.

Details of Changes					
Type of action or change required	Action Required	Notes			
Client Name Change:					
Change of Address:					
Scope Change:					
Contact Change:					
Number of Employees Change:					
Major NCs Raised:					
Special Visit Recommended:					
Other:					

Version 20 Page 3 of 29

Report No.	528659
Date:	11/11/2019



Audit Report Part A - Executive Summary

Executive Summary

Audit days: 11-14/11/2019 (3 days). Role of auditor: Mario M Terol (LA EQM 54 code and report writing). The audit Plan was confirmed with Mrs. Nicola Turvey on 30/09/2019. Verified the certification scope: **'Provision of Higher Education and related support services at the University of Southampton'**. The EMS includes all sections of the standards.

University of Southampton is a centenary University with more than 25K students and around 5500 employees. Southampton University's main Campus is Highfield. There are additional campuses at Avenue, Boldrewood, Winchester School of Art, and various Halls of residence, such as Glen Eyre, etc. The organization has closed the Minor NCs and considered the OFIs rose in the last audit and no trends have been identified.

Top management has showed its commitment with EMS across the audit and setting the Policy, objectives, targets and actions to achieve them. Equally, the Risks and opportunities have been established and actions have been set. Regarding Context analysis and identification of interested parties there are no changes compared to the previous visit.

Positive comments: Throughout the site tour the level of maintenance and housekeeping is of a very high standard. Also, very high level of commitment across the whole organization. Very good Energy control, New initiatives within Procurement Department, etc.

2 Minor NCs & 2 OFIs were raised in this visit. All other processes and operations were found to be very effective and supported by proper documented information. As a conclusion, the EMS provides confidence with legal requirements compliance and continuous improvement. **The certification is recommended.**

The next audit visit will be a Reassessment audit and has been scheduled to take place from 6th to 10th July 2020 (4 days/man). The assessor would like to thank the company for the openness and hospitality shown throughout audit.

- This visit was satisfactory, continued registration / certification is recommended.
- Minor NCs and OFIs have been raised.
- Any findings are as detailed on the following page(s).

The following post-audit action(s) shall be taken by the client: CAPs to be completed and sent by the client to caps@nqa.com within 3 months.

Major	Minor	,	OFIs	2	AoCs	
NCs	NCs	2	OFIS	2	AUCS	

Is there any conflict of interest which exists between the Auditor(s) and the client, and are there any situations known to them that presents themselves, or NQA, with a potential conflict of interest in respect to the audit undertaken.

Version 20 Page 4 of 29

Report No.	528659
Date:	11/11/2019

Audit Findings

Ref No.	Clause No.	Details of any finding(s) raised.	Type (Major NC, Minor NC, OFI or AoC)
01	7.3/8.2f	The company is not fully compliant with the clause detailed, in that: There's no evidence that organization had provided Training related Emergency preparedness and response. Induction training in order to ensure all persons doing work under organization's control are aware about EMS requirements	Minor NC
02	7.5	 It's recommended to update the following records: UOSEMSR010 Register of Documents (some of them don't match with the latest update, such as Management review record, Nonconformities, etc. Evacuation Procedure Building 35 (FIREVAC1.PROC, 1/09/14). DC appears as Senior Fire Warden and person who approved the Procedure but now he left the organization. 	OFI
03	8.1/8.2	Due to the size of the University, the tasks are very spread among different department and people, so it would be beneficial if they collect in advance all the records related with operational controls and emergency preparedness	OFI
04	8.1/8.2	The company is not fully compliant with the clause detailed, in that: During site tour at Building 35 and Glen Eyre Halls of Residence, the organization wasn't able to show evidence of the following records: • Fire drills (both sites) • Fire Alarm testing, Emergency lighting testing and all the Emergency controls (Glen Eyre) • Legionella inspections (both sites) • Boiler inspections (Glen Eyre)	Minor NC
		End of Findings	

Note: Responses to findings must be sent using the Corrective Action Plan form, as applicable, to caps@nqa.com within the timeframes stated on Page 4.

Management system performance; such as trends in audit findings that require further investigation at the next recertification audit.

Mandatory completion at the Head Office Audit of Surveillance Year 2

Detail that the previous recertification (or stage 2), surveillance 1 and surveillance 2 results have been reviewed and whether there are any trends in non-conformities or other issues which require further investigation at the next recertification audit.

Version 20 Page 5 of 29

Report No.	528659
Date:	11/11/2019

	Closure of Findings from Previous Audit: Report No. 465668, Dated 30/10/2018				
Ref No.	Ref Detail of finding and client action			Outcome (Closed or Escalated)	
	Clause	Category	Summarise Action(s) Taken to Prevent Recurrence	,	
01	9.1.2	Minor NC	Wide Lanes Sports Ground: Wash down area in the grounds maintenance compound. Sump in place to collect washings. Washings contain vehicle washings and line paint markings. It is understood from discussions with the site manager that the sump has an overflow to the soakaway. It is unclear how this fits in with the site's sewage treatment plant and infiltration system permit. The sump is not detailed on the drainage plan reviewed as part of the audit. Verified UOSEMSR012 Register of Non-conformities spreadsheet & Non-conformity & CA form (closed on Dec 2018). People now are aware about this and has been included within the Drainage plan (PlanOn Asset 26331)	Closed	
02	8.1	Minor NC	Wide Lanes Sports Ground: Waste controls at Wide Lanes Sports Ground appear to operate outside the waste controls in place through campus services manager. -There was no consignee return available at the time of the audit for hazardous waste collected from this site following incident of spillage of hydraulic fuel. Waste transfer organised by CSG 5/3/18. -There were no transfer notes available at the time of the audit for emptying of septic tank —understood to be undertaken monthly Verified UOSEMSR012 Register of Non-conformities spreadsheet & Non-conformity & CA form (closed on 30/10/18). Checked the Transfer note from J&G (UNIVERSA/ATSO1 on 5/03/18)	Closed	
03	8.1	Minor NC	Boldrewood Campus: Bins around Faculty of Engineering and Environment -Building 176, were observed. These are labelled for wood, foam and swarf shavings. However, following discussion with technical lead (Jack Monaghan) it was noted that swarf metal is being segregated and disposed of via the EDMC (Engineering and Design Manufacturing Centre) at Highfield. Further conversations with campus services manager identified that this waste stream is collected by Southampton Steel. There were no waste transfer notes recorded on the system for this waste stream at the time of the audit. Verified UOSEMSR012 Register of Non-conformities spreadsheet & Non-conformity & CA form (closed on 23/11/18). Verified Annual transfer note from SSI (31/12/18 – 1/01/19)	Closed	

Version 20 Page 6 of 29

Report No.	528659	
Date:	11/11/2019	

04	8.2	OFI	Landscape/Grounds Maintenance:	Closed
			Building 44 service yard -Garage used to keep equipment with external fuel store. Several jerry cans/fuel cans within fuel store roughly <100 litres stored petrol/diesel. Discussions held with landscape manager and grounds maintenance operator —drive to use battery operated equipment. Potential to eliminate/reduce storage of fuel (e.g. refilling tractor at garage). If fuel store to be continued to be used it is recommended that a drain cover is provided in the event of spill (surface water drain within 4-5 metres)	
			They have considered this OFI but is still in progress	
05	8.2	Minor NC	Landscape/Grounds Maintenance: Annual maintenance of Kubota tractor –HX17 LLV (machinery service record form) has not been completed. Verified UOSEMSR012 Register of Non-conformities spreadsheet & Non-conformity & CA form (closed on 14/12/18). Verified Machinery Record form for Kubota tractor (s/n B2650). 14/12/18 Annual service due. Booked with NFFM date to be advised.	Closed
06	7.4.2	OFI	Wessex Lane Halls of Residence: Montefiore P Block –Flat 1. It was observed that recycling waste had been disposed of within the food waste. This block was under a trial using the lazy bin to encourage students to dispose of their own waste. Communications observed in the kitchen on waste segregation. Communications within the trial blocks (E, J up to T block) differed to other blocks. It was noted that types of food waste were communicated via poster to all sites except Montefiore 3. They have considered this OFI but is still in progress	Closed
07	4.3	Minor NC	The University has not performed enough analysis of the scope for each location to determine the boundaries and applicability of the Environmental Management System as noted in sections a) to e). Refer to Minor NC JTS01 Verified UOSEMSR012 Register of Non-conformities spreadsheet & Non-conformity & CA form (closed on 19/12/18). Verified new register UOSEMSR015 Register of determining scope (Version 2, 18/12/18)	Closed
08	5.3	OFI	The Job Description for the Environment & Sustainability Manager issued 26/02/2018 should be clarified. As a point of clarification, the University should ensure the Job Description is in line with the one stated in the Register of Roles, Responsibilities & Training Needs. Refer OFI JTS02	Closed
			They have considered this OFI but is still in progress	

Version 20 Page 7 of 29

Report No.	528659
Date:	11/11/2019

09	7.2	OFI	The Competence & Awareness Procedure, UOSEMSP007 Version 10 issued 23/11/2017 does not distinguish between the Competency type training and Awareness type training. It would benefit the university to make distinguish between the two types of training. Refer to OFI JTS03 They have considered this OFI with UOSEMSR08 Register of environmental training records (Version 21, 6/11/19)	Closed
10	9.2.2	OFI	The University should consider adding a category for Opportunities for Improvement to the Register of non-conformities UOSEMSR012 Version 26 Issue 08.11.2017 to ensure all such improvement suggestions are acted upon and closed. Refer OFI JTS 04 Verified UOSEMSR012 Register of Non-conformities spreadsheet (Open/Closed OFI, last update 23/07/19)	Closed

Version 20 Page 8 of 29

Report No.	528659
Date:	11/11/2019

Opening/Closing Meetings:

Opening and closing meetings were performed in accordance with NQA Form 335. The objective of the audit was to confirm that the management system had been established and implemented in accordance with the requirements of the audit standard.

Process/audit area: Organisational Context (External / Internal issues /interested parties / bound		
and scope / process identification)		
Auditees: NT		
Auditor (if applicable):		
Evidence to support audit conclusion:		

According NT, there're no significant changes between their External/Internal factors since last audit. They have maintained the Register UOSEMR13 Context of the Organisation (Version 2, 5/01/18). Sampled and checked as follows:

Context Factor	Context Factor	Potential effect on the organisation (risks/opportunities)	Potential effect on the EMS (risks/opportunities)	Control Measure(s)
Political (External)	Brexit	Changes in compliance obligations.	Environmental legislation changes.	Keep informed through environmental forum
	Visas	Ability to recruit international students.	None expected.	N/A
	Planning Regulations	Greenbelt developed. Local population and distribution of staff affects commuting distances.	Commuting distances and mode may change. Opportunity to expand bus provision.	Keep informed on local development plans.
	Political uncertainty overseas	Staff travel restricted by political situations overseas.	Reduction in air travel.	N/A out of scope of EMS. Managed through H&S systems/processes.
Economic (External)	Oil/Energy prices	Increase cost to the University.	Opportunity for the EMS to deliver cost savings.	Changing behaviour (use less) and reporting usage and opportunities for further savings. CMP.
Technological (External)	e.g. solar panels/ electric vehicles/battery storage/comms. There will be changes that if economically feasible the University will adopt to reduce our impacts.	The University carries out research to advance technology – good reputational opportunity. If economically feasible the University will adopt new technology.	Increase or decrease in energy use – depends on use of research equipment and savings the technology may offer.	N/A
Legal (External)	EU referendum	See political context section	n.	
Environment (External)	Water and Utilities	Increase cost to the University.	Opportunity for the EMS to deliver cost savings.	Changing behaviour (use less) and reporting usage and opportunities for further savings.

Version 20 Page 9 of 29

Report No.	528659	
Date:	11/11/2019	



Also, as regards interested parties no changes in their form UOSEMSR014 (Version 7, 29/10/18). Sampled as follows:

Interested party	Needs/expectations/requirements	Compliance obligations	Control Measures (actions to manage risks & opportunities)
AUDE (Association of University Directors of Estates)	Participation in Green Scorecard	Not considered to be a co	
Chamber of Commerce	Planning consulted on transport development. Meeting attendance.	None	
Contractors	Clear communication about the University's environmental requirements	None	Managed as per Control of Contractors as per UOSEMSOP009
EAUC (Environmental Association of University and Colleges)	None identified	None	
Environment Agency	Compliance with applicable legislative requirements. Reporting of significant environmental incidents.	Legal Compliance - refer t register	o compliance obligations
Funding Bodies (e.g. research councils)	Expectations around facilities such as space, equipment etc.	None	
Health & Safety Office	Collaboration on overlapping topics such as training, hazardous waste.	None	
HESA (Higher education statistics agency)	Provision of environmental data as part of annual Estate Management Record (EMR)	Yes - Collect data as required by the return annually in January	Refer to compliance obligations register
Local Authorities	Travel Plan	Yes - Annual Travel Plan update approved by Southampton City Council	Refer to compliance obligations register
Public Transport Providers	Engagement with transport providers such as South West Trains.	Travel Plan objectives	
Staff	High standard of environmental performance.	None	See roles and responsibilities as defined in EMS Manual.
Students	High standard of environmental performance. Sustainable development part of the curriculum.	None	See roles and responsibilities as defined in EMS Manual.
Prospective students	High standard of environmental performance. Sustainable development part of the curriculum.	None	
SUSU	High standard of environmental performance. Engagement to support student experience.	None	
Suppliers	Compliance with applicable legislative requirements.	None	

Version 20 Page 10 of 29

Report No.	528659	
Date:	11/11/2019	



The scope of the University has been defined within the Environment Management System Manual UOSEMSM001 (Version 17, 29/10/2018) as: 'Provision of Higher Education and related support services at the University of Southampton'. Currently, the University counts with 21 sites under this certification. The Students Union is an independent organisation which the University can influence, but does not directly control. All the Clauses are applicable.

The processes and interaction have defined Environment Management System Manual UOSEMSM001 Version 17 updated 29/10/2018.

Conclusion of the overall effectiveness of the process

Process / Audit Area satisfactory.

Process/audit area: Leadership (Process based approach, risk based thinking, policy, ident	
roles and responsibilities)	
Auditees:	NT, MW, RM
Auditor (if applicable):	

Evidence to support audit conclusion:

Across the audit, interviews have been held with different Top Management roles, such as MW (Director of Estates and Operations) or Rachel Mills (Dean of Faculty Environmental and Life Sciences/Sustainability Champion) who have explained the University's environmental strategy, short / medium term challenges: promoting and making visible a more eco-friendly culture, reducing consumption, etc.), the communication channels used to expand these initiatives, etc. These discussions reconfirmed their commitment to the implementation of the EMS and their full leadership support for the two environmental specialists Nicola Turvey and Adam Tewkesbury in the department.

In addition, it has been checked the Environment & Sustainability Strategy Roadmap (16/09/2019) where University (Environmental & Sustainability team, ESST) sets the strategy plan, principles, areas to explore, etc.

The current Environmental and Sustainability Policy is signed by the President and Vice Chancellor (MS) in July 2019. The Policy is available on G-Drive for internal personnel and Website (Sustainability section) for everybody (external interested parties).

The organisational roles, responsibilities and authorities have defined Environment Management System Manual UOSEMSM001 (section 5). A full record of Roles & Responsibilities is kept in the Register of Roles, Responsibilities & Training Needs, UOSEMSR009 (Version 7, 11/11/2019) where the following is defined: Role; Key EMS Responsibilities/Activates; Education, training or experience required to meet EMS responsibilities (Knowledge - facts, information, and skills acquired through experience or education); Competence Achieved (education, training, experience); "Evidence (e.g. qualifications; induction; tool box talk; specified job requirement assessed at interview") & Training Required?. Sampled the following roles:

- Landscape Services Manager
- Waste & Recycling operatives/porter/ domestic services, etc.
- Waste & Recycling Manger
- Campus Services Manger
- Communication Consultant & Officers
- Energy Manger
- Assistant Director of Sustainability & Transport
- Environment & Sustainability Manger

Report No.	528659	
Date:	11/11/2019	



- University Sustainability Champion
- Vice Chancellor & President

In addition, this record has another tag Group Roles & Responsibilities which includes the following: University Council, University Executive, Environment & Sustainability Strategy Committee, Estates & Facilities Board & Carbon Management Steering Group.

Checked the Job Description from for the Environment & Sustainability Manager issued 26/02/2018, now the information is almost in conjunction (still in progress) with the Register UOSEMR009.

Conclusion of the overall effectiveness of the process

Process / Audit Area satisfactory.

Process/audit area: Planning Processes (Risks & Opportunities, Objectives, Aspects/Impacts & Legal	
	Compliance)
Auditees:	NT
Auditor (if applicable):	

Evidence to support audit conclusion:

UOSEMSP019 Actions to Address Risks & Opportunities (Version 2, 27/03/17). The main areas/activities where the risks And opportunities have been identified are Organizational context, needs and expectations of interested parties, emergency situations, Legal compliance, planning action and environmental aspects. The assessment is conducted through different records: Environmental Objectives, Compliance regulations & Aspects register. They have identified within their Management review the following risks/opportunities: **Risks:** Competition for funding to make energy / building improvements;

Require increased & improved collaborative working to ensure electricity, gas and water reduction targets are met.

Opportunities: Cross departmental working, between Mechanical Engineers, Planners, Building Managers, Academic Faculties, Energy, PMU & Sustainability Manager;

Faculties to set up electricity working groups;

Increased awareness campaigns through monthly reports to site managers on electricity usage & waste & recycling breakdowns

The objectives and planned actions are noted in the register as:

- Sustainability area "objectives are grouped into different themes in line with environmental aspects and compliance obligations"
- Objective "an aim, goal or target arising from the environmental policy to achieve"
- KPI "an indicator that provides information about the performance of the organisation"
- Target "detailed quantifiable performance target to be met in order to (help) achieve objective"
- Start date
- Completion date
- Actions "Activity required to meet target & resources required"
- Responsibility
- Progress/results evaluation comments
- Communication channels

Report No.	528659
Date:	11/11/2019



The Objectives are based on the Environmental Policy which includes the following areas: Biodiversity, Carbon, Climate change, Education for sustainable development, Engagement, Environmental Management System, Pollution prevention and legal compliance, Procurement, Sustainable Buildings, Travel, Waste and Water.

Since last audit, they have included one more area but it will not be included as an official objective until recertification in 2020:

Sustainable Catering. Checked meetings on 28/08/19 & 22/10/19.

Some actions have been put in place: Advertise the keep-cups on the LCD screens, To put together a map of where all the supplier are in to NOC, suitable for the LCD screens in café, To try out a ratio of menu delivery 50/50 veg/meat.

Checked the objectives set in Biodiversity area (9) and the action plan in order to achieve them (last update on 8/08/19):

Objective	Measurement		Due for completion	Completion date	Status	Comment
		E&F Landscape Services			Amber	Grounds maintenance plans are under constant review - the habitat management principles are being met as reported in the November 2017 Biodiversity Report. Next report due November 2018. An updated version of the Valley Gardens Management Plan was ciculated to the Biodiversity Group ahead of the meeting on 02.11.18. Kevin Monachan and Martyn Wyss are undertaking a campus tour on the 14.11.18
Review and update of Glen Eyre and Valley Gardens management plan	Updated management plan		Annually November		Amber	Updated plans were presented to the Blodiversity Group 09.11.17. Next review due November 2018. An updated version of the Valley Gardens Management Plan was ciculated to the Blodiversity Group ahead of the meeting on 02.11.18.
,,	document 'biodiversity annual report contents'	Environment & Sustainability Manager (with input from Biodiversity Group members)	Annually - November		Amber	Annual Report to the Estates & Facilities Board. Next report due November 2018. Adam Tewkesbury and Nicola Turvey to review.
	enhancements to ditch/Greenway on east	E&F Landscape Services Manager & Programme Management Unit			Amber	Work is ongoing. Progress to be reported annually in November. Martyn Wyss is in discussions with the PMU.
green spaces on the University	,	Environment & Sustainability Manager	Feb-20		Green	Greg sandford is now tasked with reviewing the website, Biodiversity being 1 x of the sustainability pages, this will happen between Aug 2019 - Feb 2020
campuses.	Develop a 'green space drawing' and a log of projects undertaken and their effect on the total green space within each campus.	Infrastructure Manager	Autumn 2019		Amber	The green space drawing does not currently exist. Possibility that Malcolm Hudson can sell the idea to a student as part of a masters project. Google Earth archives may be a starting point.
	Develop a project brief for a summer intern to complete a mapping exercise of known species highlighting the location of species of conservation interest and develoning a monitoring plan.		Nov-17		Amber	Objective to be reviewed by LP, JL and M G. Species mapping and monitoring was undertaken by interns during Summer 2017. Lucy Potashnick has left the University and therefore there is no update at this current time.
Understand how and where bats are using Highfield Campus		University Mammal Soc	Nov-18		Amber	
		E&F Landscapes Services Manager	May-18		Amber	If funds permit extend survey to cover species other than newts.

Concerning the Environmental Aspects & Impacts, no significant changes since last audit. Defined in Procedure UOSEMSP001 Environmental aspects (Version 11, 1/11/19 and managed by LUS Portal). The register still keeps continue assessed for normal, abnormal & emergency conditions. Aspects and Impacts are identified along with their action plans and relevant legislation. Both addressed at central levels. Most of them are related with Objectives and Targets set. They have 55 identified aspects, the highest ones are: FGAS (486), TRAVEL COMMUTING MILLEAGE (324), GAS & ELECTRICAL USAGE (216) & PROCUREMENT OFFICE FURNITURE (216). Sampled and checked as follows:

Waste Management (6 identified aspects)

Waste management: food (scoring 24)

Impact: Air pollution, Contamination of land, etc.

Control measures: Catering procedures. Waste management operating procedure.

Lifecycle stage: End of life treatment

Land contamination (5 identified aspects)

Waste management: recycling waste (scoring 162)

Impact: Condition of packaging, end of life, use of non-renewable resource, etc.

 Version 20
 Page 13 of 29
 Report No.
 528659

 Date:
 11/11/2019



Control measures: Procurement procedure. Waste management operational procedure.

Abnormal & Emergency (5 identified aspects)

Chemicals GMO (scoring 36)

Impact: Contamination of land, Wildlife decease, etc.

Lifecycle stage: Use of product/service Control measure: H&S procedure in place

As regards Legal compliance, again, University controls the legal requirements through LUS system, (UOSEMSR001, Register of Compliance Regulations, Version 43 dated 30/10/2019).

They have identified Pollution (11), Air (10), Water (8), Waste (13), Energy & Climate change (11), Hazards (3), Planning/Wildlife (13), Land (1), Nuisance (4) & Standards (34). All of them reviewed on 6/10/19. If any action is required, the system allows completing and registering them.

Sampled and checked as follows:

- Waste: Control of Pollution Act 1989; The Hazardous Waste 2005; Controlled waste Regulation 2012, etc. All of them fully compliant.
- Hazards: The Control of Substances Hazardous to Heath (COSHH); The Carriage of Dangerous Goods and Use of Transportable Pressure Equipment Regulations 2009. Fully compliant.
- Air: The Clean Air Act 1993; The Fluorinated Greenhouse Gases Regulations 2015; etc. Fully compliant.
- Pollution: European Union (Withdrawal) Act 2018 (Still pending); The Environmental Permitting Regulations 2016 (Water- Waste Exemptions). Fully compliant.

Conclusion of the overall effectiveness of the process

Process / Audit Area satisfactory.

Process/audit area: Improvement / Performance Evaluation Processes (Management review, Interr	
	Audit, No-conformance, Continual Improvement)
Auditees:	NT
Auditor (if applicable):	

Evidence to support audit conclusion:

University has defined the Management review process within its procedure UOSEMSP011 Management review (Version 5, 28/01/19). Verified the Minutes (21/02/19). The Annual report was carried out on 21/02/19. Attendees: PT, HA, MS, MT, SP, DC, NT, BT. Apologies MW & AT. All the inputs and outputs are met. Special emphasis in the objectives & Actions taken to achieve them.

Verified Audit Schedule from Sept 2018 to July 2019 (UOSEMRS007 Internal audit register, Version 31, 4/11/19). In that period they have received 4 reports as follows: 6/09/18 (3 Minor NCs and 12 OFIs), 26/11/18 (2 Minor NCs and 10 OFIs), 26/02/19 (1 Minor NC & 8 OFIs) & 9/07/19 (20 OFIs). All the findings are registered in the UOSEMSR012 Register of NC (there's a tag for OFIs)

The audits have been conducted by LOREUS (AH as Internal auditor) and based in Services.

As regards Non-conformities and Incidents, University has the procedure UOSEMSP009 Non-conformity and corrective action (Version 11, 12/04/17) and uses two records: all findings identified during audits (Internal/External) are treated through UOSEMSR012 Register of Non-conformities, sampled as follows:

 Version 20
 Page 14 of 29
 Report No.
 528659

 Date:
 11/11/2019

- 27/11/18. Internal Audit. Operational control. No spill kit within the Chemical store at WSA. Closed on 22/02/19
- 27/02/19. Internal Audit. Competence. No training records for JM in STA Level 3 in pool plant operations. Closed 19/03/19

And UOSEMSR004 Register of Environmental incidents (Version 61, 14/06/19). 8 environmental incidents have been recorded since last audit. Sampled as follows:

March 2019/July 2019. When there are prolonged periods of drought, a reddish layer is generated on the surface of the stream. Location (behind Building 42). On-going.

Conclusion of the overall effectiveness of the process

Process / Audit Area satisfactory.

Version 20 Page 15 of 29

Report No.	528659
Date:	11/11/2019



Process/audit area:	Waste & Recycling
Auditees:	MT (Campus Services Manager)
Auditor (if applicable):	

Evidence to support audit conclusion:

Organization defines this processes through UOSEMSOP002 Waste Management procedure (Version 9, 6/03/17). MT comprehensibly explained an overall idea about the different channels to manage the waste & recycling streams. There're around 200 people involved in this process (130 cleaners). They collect the waste from bins and transfer to the containers located in specific areas. Food waste (Every day), General waste (Once per week). For food waste they usually have 2-6 wheelies bins (250L) and for general waste (1500L Euro-bin).

All areas across the facilities and venues visited have been found with a high level of clean and tidy and good housekeeping was observed throughout.

Communication: A monthly meeting with Waste & Recycling team (all the incidents are treated there) & on a daily basis MT has meetings with the supervisors.

Checked the following transfer notes:

BIFFA (Food waste). Annual transfer note from 1/04/19 to 31/03/20.
 Description of the waste Biodegradable kitchen and canteen waste.
 Verified the transfer notes date 25/03/19 for B50, B41, B38 & B40 buildings.
 The documents included all the information:

(SIC code 85.42/1, EWC code 20.01.08, Carrier, Quantity, dates, etc.)

QINETIQ (Hazardous waste, chemicals)
 Transfer Note BW087 collected on 10/10/19:
 (EWC 07.01.03, 1100 Kg + EWC 07.01.04, 2200 Kg).
 BW086 collected on 22/08/19:
 (EWC 07.01.03, 100Kg + EWC 07.01.04, 2200 Kg + 1EWC 16.03.05, 100 Kg)

SUEZ (General & Recycling waste)
 Annual transfer note from 31/12/18 to 30/12/19.
 EWC code 20.03.01 (30/09/19)

 PREMIER SCHREDDING (Confidential paper) 27/07/19 (EWC 20.01.01, 250 sacks)

• SRCL (Chemical waste) 27/06/19,

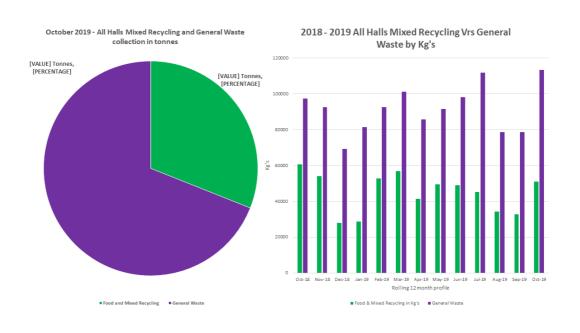
Transfer Note Ref. MDBE0D6UWY:

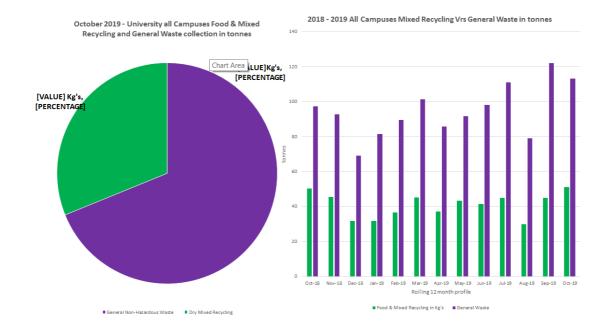
EWC 18.01.03 (165 Kg) & EWC 18.02.02 (95 Kg)

This Department controls consumption of Mixed Recycling and General waste of all the Campuses and Halls of Residence per month. The following figures reflects the overall waste of October:

 Version 20
 Page 16 of 29
 Report No.
 528659

 Date:
 11/11/2019





Also, they have waste donation points for Homecare & Cosmetics, Soft Furnishing, Electrical items & Clothing & Shoes.

Conclusion of the overall effectiveness of the process

Process / Audit Area satisfactory.

Version 20	Page 17 of 29
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Report No.	528659
Date:	11/11/2019



Process/audit area:	Highfield Campus tour
Auditees:	MW (Landscaping Manager)
Auditor (if applicable):	

Evidence to support audit conclusion:

A quick tour of external areas and green areas was carried out at Highfield Campus. Good evidence of waste control, well defined areas and facilities for collection and storage of waste streams. No evidence of spills or uncontrolled discharges. The grounds were very well maintained and no litter, noise or other nuisance.

A discussion about this Department and its activities was had with MW who joined to the University 5.5 years ago. There are 11 full time employees involved in this activity: 8 gardeners & 3 supervisors. Also, during summer season 2 more employees work as support. There are 3 teams in order to cover all the campuses and Halls of residences areas.

Communications are carried out on a daily basis, but there are formal monthly meetings with supervisors and another with Directors and twice meetings per year with Executives. Basically, this department is responsible for the maintenance and repair of all green areas within the campuses. They often work together with the Building Department to design and create new spaces. Due to the size of the University and the reduction of the budget for this Department, they have decided to divide the spaces to be more effective. For example, the Highfield Campus has been divided into 4 areas (A, B, C and D) and through a planning the tasks between the different workers are reapplied. Checked the Highfield Job Sheet Week Commencing on 04/11/19 as follows:

• DD (Area C) Supervisor BC.

Tie and lift Crocosmia: Building 32

Remove leaves and weeds from hazel and yew - Building 45

Weed out and edge Pampas grass - Building 45

Cut and trim car park hedging - Building 45

Dig out damaged viburnum/wind tunnel

Bulb and plant ideas for oak tree/trim lavender

Also, there is a bank of tasks per seasons, seen the Autumn one:

- Check and cut back any overhanging growth into footpaths & car parking areas
- Check and weed spray of weeds in hard areas as necessary
- Grass cutting in liaison with Supervisor and other area gardeners
- Leaf clearance all areas
- Start to remove unwanted shrubs and prepare Bus Station border in liaison with Sean
- Clear foliage away from steps at rear of swimming pool
- Tidy out and remove unwanted plants in stream border to rear of Dance Studio
- Etc.

According MW they carry out annual inventories/inspections of all trees, to ensure that they are in good condition and are not dangerous.

Verified the following projects: Library project; Cleaning stream; Valley Garden & Engineer square.

Conclusion of the overall effectiveness of the process

Process / Audit Area satisfactory.

Version 20	Page 18 of 29

Report No.	528659
Date:	11/11/2019



Process/audit area: Site tour (incl. Operational controls & Emergency preparedness) at Glen Eyre	
	of Residence and B35 at Highfield Campus
Auditees: RP (Glen Eyre Manager) Sarah (Team Leader at Glen Eyre) & NT	
Auditor (if applicable):	
Evidence to cupport audit conclusion:	

Evidence to support audit conclusion:

Glen Eyre Halls of Residence (Main Hall Building).

This area is a space destined for student accommodation. It currently hosts about 2,200 students.

DEC on display in reception. Valid until 29/06/2020. DEC Rating: C (66)

There are notice boards across the facilities with Environmental and H&S displayed information such as: First Aiders List, H&S poster, Waste & Recycling tips, Fire safety & Security information, Key dates, Emergency Fire Procedure, etc.

<u>Waste</u> The organization has provided different bins across the facilities (the waste is collected on a daily basis and transferred to the waste area located in the rear of the Main Hall: Electrical waste, Mixed Recycling waste, General waste and Food waste). They use an electric van to move the waste.

<u>Chemical store</u> (under control in specific room. Good identification of chemicals, COSHH sheets at hand).

FGAS inspections Checked the following equipment: s/n 45010005 & s/n 56100444

The inspection has been provided in-house in June 2019. The first one failed the test. The action taken was switching off the equipment and replacement it.

Boilers No evidence

Asbestos survey Provided by Envirochem, low risk (6/08/19)

Legionella No evidence

Emergency preparedness and response

Fire Alarm testing, Emergency Lighting, etc. No evidence; Fire Drills No evidence

Fire extinguishers last external inspection provided by FIREMARK on May 2019

PAT testing (provided in house and managed via PLANON system, 4/02/19)

Five years Electrical Installation inspection carried out by BSA REGAL in July 2015

Building B35 (Estates & Facilities, Level 3)

DEC on display in reception. Valid until 29/06/2020. DEC Rating: C (57)

Environmental and H&S relevant information is displayed across the building: Emergency fire procedures, First Aiders, Waste disposal, etc.

<u>Waste</u> The organization has provided different bins across the facilities for mixed recycling, general waste, food (at kitchens) and shredding paper for confidential documents.

<u>Asbestos Surveys</u> Provided by Envirochem on a yearly basis for low level areas and biannual for medium. Last one conducted on 21/02/19.

Legionella No evidence

FGAS inspections Checked the following equipment: s/n 1201698 & s/n T000420

The inspection has been provided in-house in March 2019. Also they carry out biannual services, last one carried out in September 2019 by DJM as inspector.

Boilers The inspection was provided by WEISHAUPT on 18/04/18, Report No. 81273708.

Emergency preparedness and response

Emergency Fire procedure: David Kiddle Building 35.

Evacuation Procedure Building 35 (FIREVAC1.PROC, 1/09/14). Approved by DC.

Emergency response Manual HSP14 (Version 1, March 10). Emergency Site plans

PAT_testing (provided in house in June/July 2019)

Five years Electrical Installation inspection carried out in house on 3/02/16.

 Version 20
 Page 19 of 29
 Report No.
 528659

 Date:
 11/11/2019



The following logs were reviewed:

- Practice fire evacuation exercise No evidence
- Weekly fire alarm checks (Every Monday, 11/11/19)
- Emergency Alarm system 9/11/19
- Emergency lighting system 29/09/19

Conclusion of the overall effectiveness of the process

Findings have been identified.

Process/audit area:	Energy Team (Monitoring & Measuring)
Auditees:	JB (Energy Manager), JA (Energy Analyst)
Auditor (if applicable):	

Evidence to support audit conclusion:

According to the explanations of JT & JA, this department is in charge of controlling energy consumption (electricity and gas mainly) and developing new initiatives that allow reducing and making consumption more efficient. They work on projects and are currently immersed in a New Metering System. Through different meters located in the buildings and with the help of AMS (Automatic Metering System) they are able to measure the real-time consumption of each building in 30 min intervals.

They have regular meetings in order to communicate their outcomes. Also, this year they have incorporated the Building Manger Meetings on a quarterly basis (verified the Minutes dated on 1/10/19 and host by AG) The previous 2 x quarterly meetings happened in April 2019 and July 2019, and it is agreed that a different building manager will host each meeting, with a quick tour of their building to begin with, in order to show others the building facilities, activities and machinery housed within, etc.

Below are some examples (images) from Power Point Presentations about:

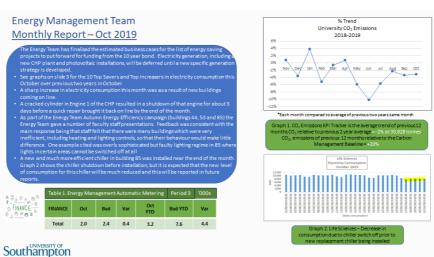
- 1. Top 10 savers/increasers buildings
- 2. The trend in relation to the consumption of electricity and gas of the University as a whole and of the Highfield Campus;
- 3. The control over CO2 emissions;
- 4. Mountbatten Building 53, the highest electricity consumption building on their estate:

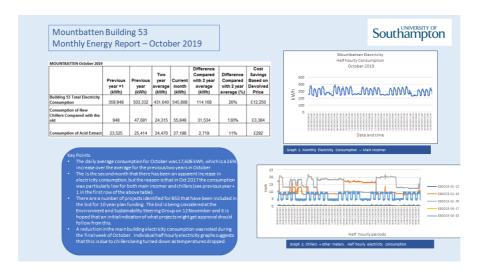
Building	Usage Oct 2019 kWh	2 Year Average kWh	difference (kWh)	Difference
Mathematics (54)	39,545.00	98,478	-58,932.50	
Tizard(13)	6,711.00	45,908	-39,196.50	
Life Sciences(85)	303,163.00	341,814	-38,651.00	-11%
Students' Union/Refectory (42)	113,200.00	131,348	-18,147.50	-14%
Health Profs & Rehab Sciences (45)	5,615.80	21,952	-16,336.40	-74%
New Zepler (59)	58,351.00	69,428	-11,077.00	-16%
Engineering Workshops (9)	27,300.75	37,879	-10,578.00	-28%
Chemistry (27)	46,234.00	53,011	-6,777.00	-13%
Lanchester (7)	20,416.00	25,303	-4,887.00	-19%
Graham Hills (29)	65,924.00	69,732.00	-3,808.00	-5%

Building	Usage Oct 2019 kWh	2 Year Average kWh	difference (kWh)	Difference %
West Bld & Staff Social Centre (40)	34,486.00	32,825	1,661.00	5%
Building 2 (2)	43,053.00	40,830	2,223.50	5%
Shackleton (44)	41,544.00	37,966	3,578.00	9%
Building 1 (1)	15,132.14	11,151	3,980.75	36%
Building 16 (16)	22,451.00	18,205	4,246.50	23%
David Kiddle (35)	28,254.00	22,428	5,826.40	26%
Synthetic Chemistry (30)	183,658.00	174,349	9,309.50	5%
Nightingale (67)	47,701.00	36,885	10,816.50	29%
Astro House Data Centre (167)	529,905.30	461,957	67,948.75	15%
New Mountbatten (53)	545,808.00	431,640	114,168.00	26%

Version 20 Page 20 of 29







Conclusion of the overall effectiveness of the process

Process / Audit Area satisfactory.

,	Version 20	Page 21 of 29		528659
			Date:	11/11/2010

Report No.	528659
Date:	11/11/2019



Process/audit area:	Sustainable Procurement (Contractors control)			
Auditees:	EH (Head of Procurement), TW (Procurement Officer), SH (Team Leader)			
Auditor (if applicable):				
Fuidance to automort audi	Fuidance to assess to suit and the conclusion.			

Evidence to support audit conclusion:

Procedure UOSEMSOP009 (Version 4, 27/09/16) in place about Control of contractors.

EH comprehensively explained all the different stages within the procurement processes (Tendering, advertising opportunities, selection process, etc.) and the new structure, strategy and challenges which they are going to address in a short/medium term. Basically, the main change in this Department has been the inclusion of Sustainability area in all their subjects (6 months ago).

Verified several documents where they have included it or have been amended in order to included it:

- Specification Guidance (for general goods and services):
 No.7. Identify the opportunities to improve the economic social and environmental wellbeing of the areas in which your organization operates; How the procurement can facilitate the involvement of SMEs and Third Sector Suppliers; Promote innovation, etc.
- Procurement Sustainable Working Group (Terms of Reference, Draft v1.0)
- Corporate and Social Responsibility in Procurement Document (31/10/19)
 Environmental section: Try to reduce our environmental impact through a framework of continual improvement and waste reduction; Reduce the supplier's impact on the environment and encouraging them to gain business standards; Educate our internal customers about environment considerations through the Specification Guidance; Ensure through our tendering governance that paper and wood products used come from forests independently certified as well-managed according to Forest Stewardship Council or from recycling materials; Considering whole life costs when procuring goods and services; evaluating (where relevant) sustainable environment credentials in tendering process; etc.

They have set some strategic objectives within above document. Sampled as follows: Update Procurement Strategy to include new Sustainable Procurement Strategy; Defining Sustainable outcomes in line with The Strategy; Agree new targets for SME; Demonstrate that they have achieved level 4 in the Flexible Framework and have plan to achieve level 5; Schedule meetings with Finance to discuss how they can improve 90% of payments; Annual reports from suppliers on their alignment to their Sustainable, etc.

Because they have a database of more than 6K suppliers, communications depend on the type of supplier / contractor and the service or product they provide. For example, they have organized a few days of approach between suppliers (100-150, the most relevant ones) and staff in order to explain the goods and services they can provide to them and also for University staff to understand how their suppliers can meet their needs: Supplier Exhibition 2019 (13-15 / 11/19).

Also, they are part of SUPC (Southern Universities Purchasing Consortium)

Conclusion of the overall effectiveness of the process

Process / Audit Area satisfactory.

Versi

sion 20	Page 22 of 29	Report No.	528659
		Dato	11/11/2010



Process/audit area:	Sustainable Transport and travel plan
Auditees: AT (Assistant Director for Sustainability & Transport)	
Auditor (if applicable):	

Evidence to support audit conclusion:

AT understandably explained the activities carried out in this Department, which are focused on providing the best and most efficient access to the University, both for students and employees, favouring and promoting the use of public transport, shared vehicle, access by bike or on foot to reduce the impact of CO2 emissions.

They have generated a long term Travel Plan (Version 7, March 2019), where they set the objectives, actions, targets, principles, approach and benefits. This plan is reviewed every 6 -12 months. In the period from 2010-2020, 9.7% CO2 has been reduced. All the documents involved in this plan are available on the website:

- Travel plan
- Action plan summary progress
- Action plan completed objectives
- Action plan Active objectives

Due to the need to look for new initiatives and motivations plus the introduction of new technologies, these documents remain alive and constantly changing.

Verified the Staff and Student Travel Surveys 2019 (7/11/19), where they carry out an analysis to know where people move from and be able to favour their journey, as well as promote new initiatives for the Travel plan

Conclusion of the overall effectiveness of the process

Process / Audit Area satisfactory.

Process/audit area:	Support Processes (Training, Awareness & Communications)
Auditees:	NT
Auditor (if applicable):	

Evidence to support audit conclusion:

University has defined all the Training & Awareness issues within USEMSP003 Competence and awareness (Version 10, 23/11/17) procedure and they record the latest trainings on USOSEMSR008 Register of environmental training records (Version 21, 6/11/19), sampled as follows:

Date	Title	Attendees	Company	Tutor
22.01.2020	EMS Awareness and spill response	UoS Building	University of	NT
	training	Managers	Southampton	
12-Sep-18	EMS OVERVIEW WORKSHOP	NT	University of	Loreus Ltd - AT
			Southampton	
22-Mar-18	Waste duty of care & emissions of water	Engineering &	University of	LP / CC
		Maintenance	Southampton	
		Team		
19-Feb-18	Environmental Awareness & Spill	Security Team	University of	AT
	Response Tool Box Talk		Southampton	
05-Feb-18	Environmental Awareness & Spill	Security Team	University of	AT
	Response Tool Box Talk		Southampton	

 Version 20
 Page 23 of 29
 Report No.
 528659

 Date:
 11/11/2019

As regards induction for new starters, they cover the following information in their Induction Training: Environmental & Sustainability Policy; Environmental aspects, impacts & management performance; EMS & benefits of enhanced environmental performance & Process for reporting environmental incidents. Unfortunately, this template has been observed but none completed by any employee. Minor NC

First Aiders. Verified the displayed list on walls for Level 3 (B35), PB (Cert. No. 120662 conducted on 26/04/18, provided by AID Training & Operations) & PT (Cert. No. 45189 conducted on 12/03/19, provided by AID Training & Operations).

Fire Warden B35 (BL, IC & DC) No evidence

Checked training about Awareness & Spill Response (for Security team) conducted on 1/02/18, 30/01/18, 19/02/18.

Through USEMSP004 Communication procedure (Version 10, 12/04/17), the University has defined the different sort of communications between staff, students and rest of their interested parties. The volume of communications is incredible and the level of control quite good. They have 2 records:

- USOSEMSR005 Register of External Communications (Version 15, 4/11/19)
 4/11/19. Citizen Science event 'The sharing Economy. Generation share'
 29/09/19. Virtual tour of Valley Gardens.
 30/05/19. UoS hosted day visit from University of Tasmania Sustainability Manager.
- USOSEMSR006 Register of Internal Communications (Version 36, 1/11/19).
 4/11/19. Media SUSSED. Supplier exhibition on 14/11/19
 30/10/19. Media SUSSED. Reminder: Matofska talk on Sharing Economy (4/11/19)
 5/10/19. Media. Staff Matters #7. Energy Campaign- reducing energy buildings.

Also, verified the Internal & External Strategic Sustainability Communications Plan (last review on 31/07/19) which includes different categories such as: UoS Sustainability SUSSED Campaigns Calendar; Energy & Carbon (Key areas of requiring Communications), Biodiversity Communications, Sustainable Transport, ISO 14001Sustainable events, Waste & Recycling, Highlights projects, activities and changes within Departments

Annual Environmental & Sustainability Report 2019 (11/07/19). Available on the website. It includes information such as: Leadership & Governance, Energy & Carbon, Waste & Recycling, Travel, Procurement, Biodiversity, Communicating Sustainability, Events, Awareness & Engagement, etc.

SUSSED Intranet system: Events, News, Information about Campuses, etc...

Staff Matters (electronic magazine)

Induction eLearning module about sustainability (mandatory for students), which includes suggestions at the end of the test.

Conclusion of the overall effectiveness of the process

Findings have been identified.

Versi

sion 20	Page 24 of 29	Report No.	
	Γ	D-t	44/44/2040



Use of Registration Marks and Logos

Use of Registration Mark (if used) is in accordance with the Rules of Registration

Yes

The organization is using the right NQA logos in stationery, emails and website

Example of the current NQA logos:

ISO 9001 (UKAS Accredited)

ISO 9001 (UKAS Accredited) with 'UKAS Tick and Crown'





More information can be found at: https://www.nqa.com/en-gb/clients/logo-library

Our logos have recently been refreshed with a new design. This does NOT mean you need to change them, but bear in mind for next time a change is due. The new designs can be downloaded from our website

If there are inaccuracies, errors or queries regarding this report or audit findings, please contact NQA Head Office on 0800 052 2424 within five working days of the closing meeting

End of Audit

 Version 20
 Page 25 of 29
 Report No.
 528659

 Date:
 11/11/2019

nqa. Audit Report Part C – Audit Plan

Audit Plan

This plan relates to the next Recertification visit. Relevant Standard/Supporting Documentation: ISO14001:2015;

Client:		University of	Audit Date/s:	6-10/07/20 (4	days)	
		Southampton				
Audit Start Time:		13.00	Lead Assessor:	Mario M Terol		
			Team Member/s			
Standard/s		ISO 14001:2015	This plan relates to the	RECERTIFICAT	ION	
			next: (audit type)			
Date	Time	Loca	tion/Department/Function		Auditor	
Day 1	13.30	Opening Meeting Review of previous findin	gs		MMT	
	14.30	workers expectations, sco	External/Internal issues, interested ope of EMS and process identificat Policies, identification of roles & re	ion)		
	16.00	Report writing	oncies, identification of foles & re	зропзівіннез)	1	
	16.30	End day 1			-	
Day 2	09.30	Impacts and Legal compli Performance evaluation	cunities, Environmental Objectives, iance) (Monitoring, measurement and a ew, Evaluation of compliance)		MMT	
	13.00	Lunch	. ,		1	
	14.00 Improvement (Nonconformity and Corrective action, Continual improvement) Resources (Training, Awareness, Communications & Documented Information)					
	15.30	Report writing				
	16.00	End day 2				
Day 3	09.30	Site tour 1 (Operational of	controls & Emergency Preparednes	ss & Response)	MMT	
	12.30	Lunch				
	13.00	Waste & Recycling				
	14.30	Sustainable Building Gro	up			
	16.00	Report writing				
	17.00	End of day 3				
D 4	00.22	C't- t 2 / 0	controls 9 Foreign 2		D 40 4=	
Day 4	09.30	Lunch	controls & Emergency Preparednes	ss & kesponse)	MMT	
	12.30 13.30	Energy Team			1	
	14.30	Procurement			-	
	16.00	Report writing			1	
	17.00	End day 4			1	
		,				
Day 5	09.30	Last interview?				
•	11.30	Report writing				

 Version 20
 Page 26 of 29
 Report No.
 528659

 Date:
 11/11/2019

nga. Audit Report Part C – Audit Plan

12.30	Closing meeting	
	End of audit	

The objectives of the audit will be:

- To confirm that the management system had been established implemented and maintained in accordance with the requirements of the audit standard.
- To evaluate the ability of the management system to ensure the client organisation meets applicable statutory, regulatory and contractual requirements. Note: A management system certification audit is not a legal compliance audit.
- To evaluate the effectiveness of the management system to ensure it is continually meeting its specified objectives
- To identify as applicable, areas of the management system for potential improvement.

The audit scope describes the extent and boundaries of the audit, such as physical locations, organisational units, activities and processes to be audited.

Where the initial or re-certification process consists of more than one audit (e.g. covering different locations), the scope of an individual audit may not cover the full certification scope, but the totality of audits shall be consistent with the scope in the certification document.

Version 20 Page 27 of 29

Report No.	528659		
Date:	11/11/2019		

nqa. Audit Report Part D – Audit Matrix

Relevant Standard/Supporting Documentation:

ISO14001:2015

- This audit programme is to be prepared by the Lead Auditor at the completion of the Stage 2 audit or the Recertification audit. It should be replicated in all subsequent surveillance visit reports.
- Where an element(s) of the programme cannot be completed at a given visit the programme shall be amended and up-issued accordingly to ensure coverage at the following visit.
- Site visits are to be included in the programme with a clear indication as to the processes intended to be sampled.

Type of visit	Stage 1	Stage 2	Surveillance 1	Surveillance 2	Recertification
Visit Due Date (MM/YY)				11-14/11/19	6-10/07/20
Mandatory Elements / Selected Processes	Processes to be audited during visits are to be indicated with a cross (X). All processes are to be audited during a three-year certification cycle excluding the recertification visit.				
Context of the organization				х	х
Leadership				х	х
Planning				х	х
Support				х	х
Performance evaluation				х	х
Improvement				х	х
Use of marks and references to certification / Client website				х	х
Site Tour				Х	Х
Operations Processes (specify from scope)					
Aspects/Impacts., Legal Compliance				Х	Х
Procurement/Contractor control				Х	Х
Sustainable Transport				Х	Х
Training, Awareness & Communications				Х	Х
Energy Team (Monitoring & measuring)				Х	х
Waste & Recycling				Х	х
Campus Maintenance				Х	Х
Operational controls				Х	Х
Off Site Processes for review at Site Visits (Specify)					
Glen Eyre Halls of Residence				Х	
Building 35				х	
Non-Core Shifts to be Audited (non-core shifts to be audited minimum of 1 per cycle)					
Client Locations to be visited (Specify)					

Audit trails will be developed based upon identified risk throughout the audit and as such timings and content may be subject to change. Where the client operates shifts, the activities that take place during shift working shall be considered when developing the audit programme

Version 20 Page 28 of 29

Report No.	528659		
Date:	11/11/2019		







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Access NQA's knowledge hub, giving a range of practical information. It's FREE. www.nqa.com/signup





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