

## Stage 1

Report for:

# Natural Resource Services Holding Company Ltd

<b>LRQA reference:</b>	LRQ00003797 / 4854914
<b>Assessment dates:</b>	03-February-2022 - 04-February-2022
<b>Reporting date:</b>	09-February-2022
<b>Client address:</b>	NRS House Site 7, Meriden Park, Cornets End Lane, Meriden, Coventry CV7 7LG, GB
<b>Assessment criteria:</b>	ISO 14001:2015
<b>Assessment team:</b>	Stella Smith
<b>LRQA client facing office:</b>	LRQ United Kingdom OU

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### Attachments:

LRQ00003797\_APP\_RC\_ST1.doc

### This report was presented to and accepted by:

**Name:** Laura Hands

**Job title:** Compliance Administrator

## 01. Executive report

### Assessment outcome:

This visit was to assess the compliance of the management system of Natural Resource Services Holding Company Ltd against ISO 14001:2015 as defined in the audit planning documentation. The outcome of the visit is recorded below.

This was a 2 day, Stage 1 (S1) audit of Natural Resource Services Holding Company Ltd, conducted against the requirements of ISO14001: 2015.

The purpose of this Stage 1 audit is to review compliance of the NRS against the Standard Requirements, determine readiness for the Stage 2 (S2) audit, and to plan for the S2 audit.

Due to Covid-19 restrictions, Day 1 of the audit was conducted as a remote video-conference assessment using Microsoft Teams and conference call for interviews and sharing of documented information, and Day 2 was conducted as a site visit to Woodcote Quarry. This is in line with LRQA and UKAS requirements.

The assessment found 11 Major Non-conformance's (Major NC) and 5 Minor Non-conformances (Minor NCs) against ISO14001: 2015 requirements.

Discussions with key personnel confirmed that sufficient resources will be made available to ensure that NRS will be ready for the 2 day S2 audit planned for March 2022.

### Continual improvement:

Continual improvement is not assessed at Stage 1. Stage 1 assessment involves the assessment of the client's management system to:

- review the design and definition of the system to confirm conformity with certification requirements such as the assessment criteria and certification scope,
- determine that all applicable statutory & regulatory requirements have been addressed,
- determine that all applicable stakeholder requirements have been addressed; and - determine that the client's management system fulfils the requirements for certification to the selected assessment criteria.

The above bullet point items have been covered by this assessment and deemed to be sufficiently developed to recommend progression to Stage 2.

Scope is confirmed as: 'Extraction, processing and supply of aggregate'.



### Areas for senior management attention:

The Stage 2 audit was reported as planned for the 1st & 2nd March 2022, prior to this ensure that:

- Effective resources are made available, and deployed, to ensure that the EMS is effectively implemented to meet the requirements of ISO14001: 2015
- Appropriate corrective actions are implemented for all raised findings, and in particular for Major Non-conformance's to ensure they are closed off or down-graded to Minor NC's

## 02. Assessment findings

Where scheme requirement differs to the standard definition below, the scheme definition will take preference

### Major Nonconformity

The absence of, or the failure to implement and maintain, one or more management system elements, or a situation which would, on the basis of the available objective evidence, raise significant doubt of the management to achieve: The policy, objectives or public commitments of the organisation, compliance with the applicable regulatory requirements, conformance to applicable customer requirements, conformance with the audit criteria deliverables.

### Minor Nonconformity

A finding indicative of a weakness in the implemented and maintained system, which has not significantly impacted on the capability of the management system or put at risk the system deliverables, but needs to be addressed to assure the future capability of the system.

<b>Reference number</b>	4902714_COVSSZ01	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 4.4 )
<b>Grade</b>	Major NC	<b>Issue Date</b>	12-January-2022
<b>Status</b>	Closed	<b>Process / Aspect</b>	Management System Planning
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB NRS House Site 7, Coventry, GB		
<b>Statement of Non Conformity</b>	A number of potential Major Non-conformance's and Minor Non-conformance's have been identified in the planning for, and establishment of the EMS.		
<b>Requirement</b>	To ensure compliance with clause 4.4: 'To achieve the intended outcomes, including enhancing its environmental performance, the organization shall establish, implement, maintain and continually improve an environmental management system, including the processes needed and their interactions, in accordance with the requirements of this International Standard'		
<b>Evidence</b>	Potential Major Non-Conformities raised in relation to: <ul style="list-style-type: none"> <li>- clause 4.3 EMS Scope is not documented</li> <li>- clause 6.1.2. Environmental Aspects Register - requires completion including for significance evaluation; significance criteria to be documented</li> <li>- clause 6.1.3 Environmental Compliance Obligations - Compliance obligations applicable to company activities require identification, and how these apply to company activities</li> <li>- clause 9.1.2 Compliance Evaluation - Process to periodically evaluate compliance/fulfilment of applicable applicable compliance obligations has not been planned for</li> <li>- clauses 4.2/4.2 - Internal / external issues, and needs and expectations of interested parties have not been identified</li> <li>- clause 6.1.1 - risks and opportunities have not been identified</li> <li>- clause 6.1.4 - 'actions' to address significant environmental aspects; compliance obligations; and risks and opportunities, and to implement and integrated these into the EMS have not been planned</li> </ul>		

**Evidence**

for

- clause 5.3 - Assigned responsibilities and authorities are not defined in the EMS
- clauses 6.2.1 /6.2.2 - Environmental objectives, and actions to achieve them, have not been established and documented
- clause 10.2 - processes for reporting various system non-conformities requires clarification; there is no clear provision for identification of non-conformity cause, determination if similar non-conformities exist/occur, and the effectiveness of corrective actions
- clause 7.2/7.3 - Environmental awareness training has not yet been planned for. Processes for the identification of potential 'other' EMS training needs have not been planned for e.g for spills training, fuel deliveries
- clause 9.2.2 - There is no documented internal EMS audit plan
- clause 9.3 - There are no plans in place to conducted the EMS management review

Potential Minor Non-conformities raised in relation to:

- clause 5.2 the Environmental Policy does not have a clear commitment to the protection of the environment, including prevention of pollution; and for continual improvement of the EMS
- clause 7.4.1 - Processes for internal and external communications have not been defined in the EMS
- clause 7.5.3 - There are no plans to identify and control documented information of an external origin
- clause 8.1/6.1.3 - 'Procedure 006 Handling of Waste' requires that waste carrier registration and site checks are required, however it was reported these are not conducted, Procedure 006 requires amending to state 'hazardous' waste instead of 'special' and to include site permit checks.

**Proposed correction, corrective action and timescales**

- ensure effective corrective actions are identified and implemented prior to the initial assessment

**Correction**

Stage 1 February 2022

Potential Major Non-Conformities raised in relation to: -

- clause 4.3 EMS Scope is now documented, however new Minor NC raised
- clause 6.1.2. Environmental Aspects Register - significance criteria is documented, aspects life cycle perspective identified, however new Major NC raised
- clause 6.1.3 Environmental Compliance Obligations - legal register documented, however new Major NC raised
- clause 9.1.2 Compliance Evaluation - Process to periodically evaluate compliance/fulfilment of applicable applicable compliance obligations is planned for with internal audit schedule
- clauses 4.1/4.2 - Internal / external issues, and needs and expectations of interested parties have been identified in Context Document

<p><b>Correction</b></p>	<p>clause 6.1.1 - risks and opportunities have been identified in the Risks and Opportunities Register</p> <p>clause 6.1.4 - 'actions' to address significant environmental aspects; compliance obligations; and risks and opportunities - no process currently in place, new Major NC</p> <p>clause 5.3 - Assigned responsibilities and authorities have been defined in the EMS, however new Major NC raised</p> <p>clauses 6.2.1 /6.2.2 - Environmental objectives, and actions to achieve them, have documented and established, however new Minor NC raised</p> <p>clause 10.2 - non-conformance and corrective action process procedures are documented, processes for reporting various system non-conformities are clarified, however new Major NC raised</p> <p>clause 7.2/7.3 - Environmental awareness training has been planned for; processes for the identification of potential 'other' EMS training needs has been planned for</p> <p>clause 9.2.2 - Documented internal EMS audit plan in place, 1st audit has been conducted</p> <p>clause 9.3 - EMS management review agenda is documented, 1st management review conducted, however new Major NC raised</p> <p>clause 5.2 the Environmental Policy does not have a clear commitment to the protection of the environment, including prevention of pollution; &amp; for continual improvement of the EMS, new Minor NC raised</p> <p>clause 7.4.1 - Processes for internal and external communications have not been defined in the EMS, new Minor NC raised</p> <p>clause 7.5.3 - No process to identify and control documented information of an external origin is in place, part of new Major NC</p> <p>clause 8.1/6.1.3 - waste issued identified during site audit, also procedure issues identified 'Procedure 006 Handling of Waste' requires that waste carrier registration and site checks are required, however it was reported these are not conducted, Procedure 006 requires amending to state 'hazardous' waste instead of 'special' and to include site permit checks - new Major NC raised</p>	
<p><b>Root Cause analysis</b></p>	<p>Gap Analysis, system in initial stages of establishment</p>	
<p><b>Corrective action</b></p>	<p>CLOSED Stage 1 February 2022</p> <p>As detailed in the Corrective Review Section, a number of the previously identified potential Major Non-conformities have been actioned and therefore closed out.</p> <p>The remaining open potential Major Non-conformities &amp; Minor Non-conformities have been raised as findings during the Stage 1 audit, and are reported separately.</p>	
<p><b>LRQA has reviewed and verified the implementation of actions taken.</b></p>	<p><b>Date of closure</b></p>	<p>04-February-2022</p>

<b>Reference number</b>	4854914_COVSSZ01	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 4.3 )
<b>Grade</b>	Minor NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Scope
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB NRS House Site 7, Coventry, GB		
<b>Statement of Non Conformity</b>	It could not be demonstrated that the EMS scope has been fully documented.		
<b>Requirement</b>	To ensure compliance with clause 4.3 of the standard: 'The organization shall determine the boundaries and applicability of the environmental management system to establish its scope. When determining this scope, the organization shall consider: e) its authority and ability to exercise control and influence		
<b>Evidence</b>	Activities not within the EMS scope have not been identified, and their boundary defined e.g. transportation & the control and influence of this operation.		
<b>Proposed correction, corrective action and timescales</b>	Identify activities not within the EMS scope, and define the boundary of control & influence - to be completed by Stage 2		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		

<b>Reference number</b>	4854914_COVSSZ02	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 5.2 )
<b>Grade</b>	Minor NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Environmental Policy
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB NRS House Site 7, Coventry, GB		
<b>Statement of Non Conformity</b>	It could not be demonstrated that the Environmental Policy fully meets the requirements of the standard.		
<b>Requirement</b>	To ensure compliance with clause 5.2 of the standard: Top management shall establish, implement and maintain an environmental policy that, within the defined scope of its environmental management system: c) includes a commitment to the protection of the environment, including prevention of pollution e) includes a commitment to continual improvement of the environmental management system to enhance environmental performance.		
<b>Evidence</b>	Generally an effective Environmental Policy has been documented, however the following issues were identified: - 'Protection of the Environment', and a clear commitment to continual improvement of the EMS are not documented (Noted pollution prevention & enhancement of environmental performance are documented)		
<b>Proposed correction, corrective action and timescales</b>	- review, amend and populate revised Environmental Policy To be conducted by Stage 2		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		



<b>Reference number</b>	4854914_COVSSZ03	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 6.1.2 )
<b>Grade</b>	Major NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Environmental Aspects
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB NRS House Site 7, Coventry, GB		
<b>Statement of Non Conformity</b>	It could not be demonstrated that all environmental aspects have been sufficiently identified, and that these have been effectively evaluated for significance.		
<b>Requirement</b>	To ensure compliance with clause 6.1.2 of the standard: - Within the defined scope of the environmental management system, the organization shall determine the environmental aspects of its activities, products and services that it can control and those that it can influence, and their associated environmental impacts, considering a life cycle perspective. The organization shall determine those aspects that have or can have a significant environmental impact, i.e. significant environmental aspects, by using established criteria.		
<b>Evidence</b>	- no aspects relating to groundwater abstraction are identified e.g. where conducted; further detail on 'waste' aspects is required e.g. identify each waste stream; and no aspects relating to the operation of site generators have been identified - the significance of aspects has not yet been evaluated to order to identify which aspects are 'significant' (ensure this is conducted for normal, abnormal and emergency situations)		
<b>Proposed correction, corrective action and timescales</b>	Review & amend impacts and aspects register; evaluate all aspects for 'significance' including for normal, abnormal and emergency situations. - to be completed by Stage 2.		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		

<b>Reference number</b>	4854914_COVSSZ04	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 6.1.3 )
<b>Grade</b>	Major NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Compliance Obligations
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB NRS House Site 7, Coventry, GB		
<b>Statement of Non Conformity</b>	It could not be identified that all applicable 'compliance obligations', and how they apply to operations have been identified and documented.		
<b>Requirement</b>	<p>To ensure compliance with clause 6.1.3 of the standard: The organization shall:</p> <ul style="list-style-type: none"> <li>a) determine and have access to the compliance obligations related to its environmental aspects;</li> <li>b) determine how these compliance obligations apply to the organization;</li> <li>c) take these compliance obligations into account when establishing, implementing, maintaining and continually improving its environmental management system.</li> </ul> <p>The organization shall maintain documented information of its compliance obligations.</p>		
<b>Evidence</b>	<p>A Legal Register has been identified which identifies most applicable legal requirements, however the following issues are identified:</p> <ul style="list-style-type: none"> <li>- there are no 'other' (non-regulatory) requirements identified e.g. codes of practise, industry sector standards</li> <li>- initial regulation dates have been identified, however regulation update dated have not been identified e.g. hazardous waste regulations</li> <li>- not all applicable regulations have been identified e.g waste (england and wales) regs, civil sanction (england) regs, environmental protection (duty of care) regs, EPA for statutory nuisance</li> </ul>		
<b>Proposed correction, corrective action and timescales</b>	Review and update Legal Register - to be completed by Stage 2		
<b>Correction</b>			
<b>Root Cause analysis</b>			



Corrective action		
LRQA has reviewed and verified the implementation of actions taken.	Date of closure	

<b>Reference number</b>	4854914_COVSSZ05	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 6.2.2 )
<b>Grade</b>	Minor NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Environmental Objectives Actions
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB NRS House Site 7, Coventry, GB		
<b>Statement of Non Conformity</b>	It could not be demonstrated that the responsibilities and time scales of actions to achieve all objectives have been defined and documented.		
<b>Requirement</b>	To ensure compliance with clause 6.2.2 of the standard: When planning how to achieve its environmental objectives, the organization shall determine: a) what will be done; b) what resources will be required; c) who will be responsible; d) when it will be completed;		
<b>Evidence</b>	Appropriate objectives and KPI's have been documented, with these generally sufficiently defined, however the responsibilities and time scales of actions for the objectives to 'increase yield' and for 'fleet' have not been designated and documented.		
<b>Proposed correction, corrective action and timescales</b>	- designate responsibilities and time-scales for objective actions To be completed by Stage 2		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		

<b>Reference number</b>	4854914_COVSSZ06	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 5.3 )
<b>Grade</b>	Major NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Roles and Responsibilities
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB NRS House Site 7, Coventry, GB		
<b>Statement of Non Conformity</b>	It could not be demonstrated that all applicable EMS roles and responsibilities have been defined in the EMS.		
<b>Requirement</b>	To ensure compliance with clause 5.3 of the standard: 'Top management shall ensure that the responsibilities and authorities for relevant roles are assigned and communicated within the organization. Top management shall assign the responsibility and authority for: a) ensuring that the environmental management system conforms to the requirements of this International Standard; b) reporting on the performance of the environmental management system, including environmental performance, to top management.		
<b>Evidence</b>	The following roles and responsibilities are not defined in the '360NRSRR-01A Roles and Responsibilities': - Compliance Team - for ensuring that the EMS conforms to the requirements of the standard; & for reporting on the performance of the EMS (including environmental performance), to top management - Responsibilities of company Directors (noted some defined in EMS Manual) - External planning consultant responsibilities; and for planning consent compliance		
<b>Proposed correction, corrective action and timescales</b>	Review and amend 360NRSRR-01A Roles and Responsibilities - to be completed by Stage 2		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		

<b>Reference number</b>	4854914_COVSSZ07	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 6.1.4 )
<b>Grade</b>	Major NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Actions
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB NRS House Site 7, Coventry, GB		
<b>Statement of Non Conformity</b>	It could not be demonstrated that effective processes are place for defining the processes for raising EMS actions, and for recording these in the EMS.		
<b>Requirement</b>	To ensure compliance with clause 6.1.4 of the standard. The organization shall plan: a) to take actions to address its: 1) significant environmental aspects; 2) compliance obligations;		
<b>Evidence</b>	- the processes by which EMS actions can be raised from are not defined in the EMS e.g for risks, issues, aspects, compliance obligations, improvement etc - the processes for recording EMS actions are not defined, & are not in place (NOTE: the use of the 'Internal Audit Action Plan' log for recording all EMS actions & non-conformity corrective actions was discussed)		
<b>Proposed correction, corrective action and timescales</b>	Define processes for raising/recording EMS actions in the EMS, implement process(s) for recording EMS actions - to be implemented by Stage 2		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		

<b>Reference number</b>	4854914_COVSSZ08	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 7.4.1 )
<b>Grade</b>	Minor NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Communications
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB NRS House Site 7, Coventry, GB		
<b>Statement of Non Conformity</b>	Communication processes have not be defined in the EMS.		
<b>Requirement</b>	The organization shall establish, implement and maintain the process (es) needed for internal and external communications relevant to the environmental management system, including: a) on what it will communicate; b) when to communicate; c) with whom to communicate; d) how to communicate		
<b>Evidence</b>	Effective processes for internal and external communications were viewed as in place, however these processes have not been defined in the EMS, these are to include: - on what is communicated; when it is communicated; to whom it is communicated; and how it is communicated - ensure these include for enabling personnel to contribute to continual improvement.		
<b>Proposed correction, corrective action and timescales</b>	define communication processes in EMS - to be completed by Stage 2		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		

<b>Reference number</b>	4854914_COVSSZ09	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 7.5 )
<b>Grade</b>	Major NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Documented Information, and Documents of an External Origin
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB NRS House Site 7, Coventry, GB		
<b>Statement of Non Conformity</b>	A number of processes are not defined and documented in the EMS/EMS Manual. It could not be demonstrated that the process for the identification and control of documented information of an external origin are defined in the EMS.		
<b>Requirement</b>	<p>To ensure compliance with <i>clause 7.5.1</i> of the standard: The organization's environmental management system shall include: a) documented information required by this International Standard; b) documented information determined by the organization as being necessary for the effectiveness of the environmental management system</p> <p>To ensure compliance with <i>clause 7.5.3</i> of the standard: 'Documented information of external origin determined by the organization to be necessary for the planning and operation of the environmental management system shall be identified, as appropriate, and controlled'</p>		
<b>Evidence</b>	<p>1) A number of processes are not documented in the EMS/EMS Manual: i) responsibilities for updating legal register ii) how the EMS scope is made available to interested parties iii) aspects responsibilities/frequency for conducting review iv) reference to objectives document v) reference for recording actions vi) reference of audit procedure/ programme, vii) frequency for conducting &amp; required attendees for management review viii) reference to non-conformity/action reporting documents and viii) processes for monitoring and measurement e.g on site noise monitoring, habitat management plan, site environmental checks</p> <p>2) It could not be demonstrated that the process for the identification and control of documented information of an external origin are defined in the EMS. These are to include, but not limited to:</p>		



<b>Evidence</b>	<ul style="list-style-type: none"> <li>- planning consents, planning records, wildlife survey, waste records</li> <li>- and to include: who retains them, the version number/issue date (if applicable).</li> <li>- a copy of the Woodcote Quarry Archaeological Survey is not retained at site</li> </ul>	
<b>Proposed correction, corrective action and timescales</b>	<ul style="list-style-type: none"> <li>Review and amend EMS Manual</li> <li>Defined processes for the control &amp; identification of external documents</li> <li>- to be completed by Stage 2</li> </ul>	
<b>Correction</b>		
<b>Root Cause analysis</b>		
<b>Corrective action</b>		
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>	

<b>Reference number</b>	4854914_COVSSZ10	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 9.3 )
<b>Grade</b>	Major NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Management Review
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB NRS House Site 7, Coventry, GB		
<b>Statement of Non Conformity</b>	It could not be demonstrated that the management review agenda covers all the requirements of the standard		
<b>Requirement</b>	To ensure compliance with clause 9.3 of the standard		
<b>Evidence</b>	Whilst a management review has been conducted, the agenda of the review does not cover all requirements of clause 9.3. This should include (but not limited to) changes in aspects, compliance obligations, interested parties, internal/external issues; complaints; compliance evaluation; opportunities outputs; the strategic direction and process performance.		
<b>Proposed correction, corrective action and timescales</b>	Review/amend management review agenda, conduct management review to revised agenda - to be completed by Stage 2		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		

<b>Reference number</b>	4854914_COVSSZ11	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 10.2 )
<b>Grade</b>	Major NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Non conformity and corrective action
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB NRS House Site 7, Coventry, GB		
<b>Statement of Non Conformity</b>	There is no clear provision for the identification of non-conformity cause, determination if similar non-conformities exist/occur, and for the effectiveness of corrective actions within the non-conformity reporting process. Processes for how non-conformity/actions are recorded/raised, are not identified in the EMS e.g. incidents/near miss forms, complaints log, audit action plan log		
<b>Requirement</b>	To ensure compliance with clause 10.2 of the standard:		
<b>Evidence</b>	<ul style="list-style-type: none"> <li>- processes for how non-conformity/actions are recorded/raised, are not identified in the EMS e.g. incidents/near miss forms, complaints log, audit action plan log</li> <li>- there is no clear provision for the identification of non-conformity cause, determination if similar non-conformities exist/occur, and for the effectiveness of corrective actions within the new audit action plan log</li> </ul>		
<b>Proposed correction, corrective action and timescales</b>	Define processes for recording non-conformity/actions; amend new audit action plan log. Implement process - to be conducted by Stage 2		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		

<b>Reference number</b>	4854914_COVSSZ12	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 6.1.3 )
<b>Grade</b>	Major NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Site Generators - Permits
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB		
<b>Statement of Non Conformity</b>	It could not be demonstrated that applicable requirements of the Medium Combustion Plant Directive have been evaluated for compliance in relation to operation of the site generators at Woodcote Quarry, and that relevant permits for their operation have been obtained from the Local Authority. Operations of site generators have not been identified in the EMS.		
<b>Requirement</b>	To ensure compliance with clause 6.1.3 of the standard.		
<b>Evidence</b>	<p>Two site generators are operational at Woodcote Quarry, with 1 used for electricity generation, and the other as a backup, with these in operation since 2019.</p> <p>It could not be demonstrated that either of the generators have a Local Authority permit for operation, when it is believed this is required to meet compliance of the 'Medium Combustion Plant Directive'. Ensure that requirements of the MCPD are fully evaluated, and that environmental permits are obtained from the Local Authority. Ensure generator operations are identified in the legal and aspects register.</p>		
<b>Proposed correction, corrective action and timescales</b>	<p>- review requirements of the MCPD, apply and obtain permit(s) from Local Authority. Include operations of generators in aspects &amp; legal register</p> <p>To be completed by Stage 2</p>		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		

<b>Reference number</b>	4854914_COVSSZ13	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 8.2 )
<b>Grade</b>	Major NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Emergency Procedure Testing
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB NRS House Site 7, Coventry, GB		
<b>Statement of Non Conformity</b>	It could not be demonstrated that all relevant emergency procedures have been planned for and implemented e.g emergency response testing, spill kit checks		
<b>Requirement</b>	To ensure compliance with clause 8.2 of the standard: 'The organization shall establish, implement and maintain the process(es) needed to prepare for and respond to potential emergency situations identified in 6.1.1. The organization shall: d) periodically test the planned response actions, where practicable'		
<b>Evidence</b>	- no environmental emergency procedure response testing e.g spills test, has been planned for, and conducted - no spill kit checks have been completed as required within the EMS		
<b>Proposed correction, corrective action and timescales</b>	Plan, conduct and report emergency procedure response testing. Conduct spill kit checks - to be completed by Stage 2		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		

<b>Reference number</b>	4854914_COVSSZ14	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 9.1.1 )
<b>Grade</b>	Minor NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Habitat Management Plan
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB		
<b>Statement of Non Conformity</b>	It could not be demonstrated that effective processes for monitoring the performance of the Habitat Management Plan have been implemented.		
<b>Requirement</b>	To ensure compliance with clause 9.1.1 of the standard: The organization shall monitor, measure, analyse and evaluate its environmental performance.		
<b>Evidence</b>	It was demonstrated that a number of actions required in the Habitat Management Plan have been completed, however no review of completed and outstanding actions has been conducted.		
<b>Proposed correction, corrective action and timescales</b>	Review Habitat Management Plan action tables - to be completed by Stage 2		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		

<b>Reference number</b>	4854914_COVSSZ15	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 7.3 )
<b>Grade</b>	Major NC	<b>Issue Date</b>	04-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Contractor Induction
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB		
<b>Statement of Non Conformity</b>	It could not be demonstrated that contractors working on site have been made aware of applicable requirements.		
<b>Requirement</b>	<p>To ensure compliance of clause 7.3 and 8.1 of the standard:</p> <p>Clause 7.3: 'The organization shall ensure that persons doing work under the organization's control are aware of:</p> <p>a) the environmental policy; b) the significant environmental aspects and related actual or potential environmental impacts associated with their work; c) their contribution to the effectiveness of the environmental management system, including the benefits of enhanced environmental performance; d) the implications of not conforming with the environmental management system requirements,</p> <p>including not fulfilling the organization's compliance obligations</p> <p>Clause 8.1: shall communicate its relevant environmental requirement(s) to external providers, including contractors</p>		
<b>Evidence</b>	All contractors are communicated the requirements of the Site Induction for Visitors and Contractors, with this including reporting of incidents and spills, however this does not communicate relevant requirements of the Environmental Policy, general EMS requirements, and any other applicable procedures e.g. noise, waste		
<b>Proposed correction, corrective action and timescales</b>	Review, and amend contractor induction		
<b>Correction</b>	- to be completed by Stage 2		
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		

<b>Reference number</b>	4854914_COVSSZ16	<b>Assessment Criteria (Clause)</b>	ISO 14001:2015 ( 6.1.3 )
<b>Grade</b>	Major NC	<b>Issue Date</b>	09-February-2022
<b>Status</b>	New	<b>Process / Aspect</b>	Waste Management
<b>Location(s)</b>	19 Woodcote Hill, Shifnal, GB		
<b>Statement of Non Conformity</b>	It could not be demonstrated that effective processes for waste management, ensuring compliance with waste regulations, have been implemented.		
<b>Requirement</b>	To ensure compliance with waste regulations		
<b>Evidence</b>	<p>1) General waste was reported as disposed of by site employees (off site), however movements of all site waste off site requires to be controlled adequately to ensure compliance with waste regulation. Therefore a waste contract requires setting up with an authorised waste contractor, ensuring that carrier registration, and site permit checks are conducted.</p> <p>2) Site contractors dispose of generated waste during servicing e.g. compressor oil waste, however no waste records for this waste have been retained, and waste disposal is not included in the service agreement contract.</p> <p>3) 'Procedure 006 Handling of Waste' requires inclusion for conducting waste carrier registration and site checks.</p>		
<b>Proposed correction, corrective action and timescales</b>	<p>Set up relevant waste contract for general waste, retain waste records &amp; conduct waste contractor checks</p> <p>Clarify with site contractors service agreements/contracts regarding waste disposal</p> <p>Review &amp; amend waste procedure</p> <p>- to be completed by Stage 2</p>		
<b>Correction</b>			
<b>Root Cause analysis</b>			
<b>Corrective action</b>			
<b>LRQA has reviewed and verified the implementation of actions taken.</b>	<b>Date of closure</b>		



### 03. Assessment summary

#### Visit generic objective:

This was a Stage 1 visit, conducted against objectives previously notified to the client. The objectives of the next visit, including any applicable visit specific objective (theme / focus), are confirmed in the audit plan attached to this report.

#### Client attendees at the opening and closing meeting:

Opening meeting 9am 3/2/22, Closing Meeting 3pm 4/2/22

Laura Hands - Compliance Administrator / Training / Health & Safety D

David Albrighton - Transport Manager / Compliance Co-ordinator

Sophie Hughes - Aggregate and Concrete Technician

Paul Lagram - Woodcote Quarry Manager (Shifnal)

Sean Crowley - Consultant

Stella Smith (LRQA)

#### Visit specific objective:

The primary objective of any LRQA visit is to verify compliance or continued compliance to the Standard, but for Stage 1 the assessor shall review the system to determine that it fulfils the requirements of the assessment criteria and covers the activities detailed within the assessment scope. The assessor will then use the information gathered to review the design of the system to determine if the client has addressed the potential risk within the system and to determine if the needs of their stakeholders have been addressed.

#### Introduction:

This report represents the findings and evaluations of a two day Stage 1 audit conducted against the requirements of ISO14001: 2015 on the 3rd & 4th February 2022.

Due to Covid-19 restrictions, Day 1 was conducted as a remote video-conference assessment using Microsoft Teams for interviews and sharing of documented information, and Day 2 was conducted on site. This is in line with LR and UKAS requirements.

The audit plan was completed in full.

The EMS scope was confirmed as 'Extraction, processing and supply of aggregate'.



<b>Assessment of:</b>	Company overview, activities, policy, leadership and EMS scope	<b>Assessor:</b>	Stella Smith
<b>Auditee(s):</b>	Laura Hands David Albrighton Sophie Hughes Paul Lagram Sean Crowley Lorraine Shirley		

**Audit trails and sources of evidence:**

Opening meeting discussions  
 Meeting with Lorraine Shirley - Company Secretary  
 357 NRSEMS-01A EMS Scope  
 Environmental Policy  
 358NRSCR-01 Clauses 4-4.2 Context  
 379NRSEMSM-01A EMS Manual

**Evaluation and conclusions:**

No changes, environmental incidents, issues or complaints were reported to have occurred since the Gap Analysis (Jan 22).

Natural Resource Services Holding Company Ltd operates 3 aggregate quarries and a recycling facility. The proposed EMS scope is to include 2 quarries - Woodcote located at Shifnal, and Cornets End Lane Quarry located at Meriden, operating under NRS Waste Care Limited. Following approval NRS plan to role ISO14001 out to the remaining operational sites. NRS operate a fleet of 50 haulage vehicles and also use additional hauliers.

The EMS scope was confirmed as 'Extraction, processing and supply of aggregate'.

There are 14 personnel based at each quarry, with the compliance team (2 personnel) supporting the quarries in the EMS implementation.

An operational EMS system has previously been implemented, with a central EMS system currently under development. Both quarries operate under planning consents, with relevant management plans in place. Woodcote has an EA groundwater abstraction license, and neither sites have a discharge consent.

A good leadership commitment was demonstrated by the Company Secretary. Adequacy of resources, environmental policy commitment, group compliance obligations, and objectives (including for transport) were discussed.

The EMS Scope has been documented with the Context document, and the EMS Manual. Generally an appropriate scope has been documented– see below

Generally an appropriate Environmental Policy has been documented and endorsed by top management. This has been included in induction, and to be communicated via the environmental awareness toolbox talk – see below

**Areas for attention:**

**Clause 4.3 EMS Scope:** Activities not within scope have not been identified and their boundary defined e.g. transportation & the control and influence of this operation– **new Minor NC 4854914\_COVSSZ01**

**Clause 5.2 Environmental Policy:** ‘Protection of the Environment’ and a clear commitment for continual improvement of the EMS are not included in the Environmental Policy (noted pollution prevention & enhancement of environmental performance are)- **new Minor NC 4854914\_COVSSZ02**

<b>Assessment of:</b>	Clauses 4, 5 and 6	<b>Assessor:</b>	Stella Smith
<b>Auditee(s):</b>	Laura Hands David Albrighton Sophie Hughes Paul Lagram Sean Crowley		

### **Audit trails and sources of evidence:**

365NRSELR-01A Environmental Legal Register  
 364NRSARL-01A Acts and Regulations  
 263NRSIAR-01A Impacts and Aspects  
 263NRSIAR-01A Impacts and Aspects  
 Environmental Aspects Risk Scoring  
 Product Life Cycle (Aggregates)  
 358NRSCR-01 Clauses 4-4.2  
 Risks and Opportunities Register NRS  
 Objectives & KPI's  
 02 v1.1. Fuel, Emissions and Air Quality V5  
 360NRSRR-01A Roles and Responsibilities  
 379NRSEMSM-01A EMS Manual

### **Evaluation and conclusions:**

The 'Context Review' document details relevant internal / external issues with risk evaluation applied. Interested parties with relevant risks & opportunities, and the EMS Scope are also contained in the Context Review document. Relevant Risks and Opportunities with mitigation actions are documented in the Risks and Opportunities Register

An Environmental Aspects Register, and the 'Product Life Cycle' have been documented. These identify most applicable environmental aspects, and the criteria for aspects evaluation / risk evaluation has been documented, however a number of issues have been identified - see below

A new 'Environmental Legal Register' has been documented, and most applicable regulations have been identified, however a number of issues have been identified - see below. It was reported by the Company Secretary that NRS are well below ESOS and SECR reporting thresholds.

An internal action plan is in place, for implementation of EMS actions, however issues with this identified - see below

Appropriate objectives and KPI's have been documented. These include for implementation of the EMS e.g. internal audit; continuation of planned routine quarry checks; Fleet better fuel efficiency with 7mpg target in place for all vehicles, driver training; maintenance/develop local parish relationships; increase yield (reduce waste) with targets for Pre-silt press and post silt press in place; FORS standard from bronze to silver.

Most objectives/actions are sufficiently defined - see below

Leadership team responsibilities are defined in the EMS Manual.

Most relevant EMS responsibilities have been defined and documented.

### Areas for attention:

**Clause 6.1.2 Environmental Aspects** - No aspects relating to groundwater abstraction have been identified e.g. where conducted; further detail on wastes aspects is required e.g. identify each waste stream; and no aspects relating to the operation of site generators have been identified. The significance of aspects has not yet been evaluated to order to identify which aspects are 'significant' (ensure this is conducted for normal, abnormal and emergency situations) - **New Major NC 4854914\_COVSSZ03**

**Clause 6.1.3 Compliance Obligations:** - No 'other' (non-regulatory) requirements have been identified e.g. codes of practise, industry sector standards; initial regulation dates have been identified, however regulation updates haven't e.g. Hazardous waste regulations; not all applicable regulations have been identified e.g Waste (England and Wales) regulations; nuisance regulations - Legal Register New **Major NC 4854914\_COVSSZ04**

**Clause 6.1.4 Actions:** the processes by which EMS actions can be raised from are not defined in the EMS e.g for risks, issues, aspects, compliance obligations, improvement etc. The processes for recording EMS actions are not defined, & are not in place (NOTE: the use of the 'Internal Audit Action Plan' log for recording all EMS actions & non-conformity corrective actions was discussed) – **new Major NC 4854914\_COVSSZ07**

**Clause 6.2.1/2 - Objectives/actions-** these are generally sufficiently defined, however the responsibilities and time scales of actions for the objectives to 'increase yield' and for 'fleet' have not been designated and documented - **new Minor NC 4854914\_COVSSZ05**

**Clause 5.3 -Roles/responsibilities.** The following roles and responsibilities are not defined in the '360NRSRR-01A Roles and Responsibilities' : Compliance Team - ensuring that the EMS conforms to the requirements of the standard & for reporting on the performance of the EMS (including environmental performance, to top management); Responsibilities of company Directors; External Planning consultant responsibilities; and for planning consent compliance - **new Major NC 4854914\_COVSSZ06**

It would be beneficial to include ESOS Regulations and SECR requirements for reference purposes - Opportunity for Improvement



<b>Assessment of:</b>	Clauses 7, 9 and 10	<b>Assessor:</b>	Stella Smith
<b>Auditee(s):</b>	Laura Hands David Albrighton Sophie Hughes Paul Lagram Sean Crowley		

### **Audit trails and sources of evidence:**

379NRSEMSM-01A EMS Manual  
Copy of Alder Mill Invoice Log  
30030NRSCR-01A Complaints Register  
Document Control Register  
970NRS TM01A NRS Training Matrix  
366NRSEAP-01A Environmental Awareness (training package)  
NRS Management Review Meeting Agenda - 14th January 2022  
41NRSTBTDAQ - 01A Dust and Air Quality TBT  
43NRSTBT-01A Spill Control TBT  
42NRSTBTND-01A Noise Pollution TBT  
Request for Training Documentation - Plant Machinery Training December 2022  
381NRSIAP – 01A Internal Audit Procedure  
EMS Internal Audit Schedule 2022  
EMS01 Quarry Management Woodcote ISO14001: 2015 14th January 2022  
Tool Box Talks: 04 Walk Around Checks; 22 Waste Storage Control; Noise  
Internal Audit Report: Wash Plant and Stores Meriden Aggregates dated 13/10/2021  
376NRSNCP-01A Non-conformance Process  
375NRSCA-01A Corrective action Process  
Internal Audit Action Plan

### **Evaluation and conclusions:**

Documentation /Manual – A new EMS Manual has been documented which provides a procedural overview of the EMS. A number of issues relating to documented information are identified, see below

Where sampled effective internal and external communication processes are in place. With complaints recorded on the 'Complaints Log' and other external communications on the Invoice Log. Internal communications include for the policy, scope, objectives, TBT's, meetings, notice board and intranet. These processes are not defined in the EMS, see below -

Effective document control procedures is in place. Where sampled effective processes for creating, updating protection, and control of internal documents was demonstrated, with all documents including for EMS held within the Document Register. It could not be demonstrated that documented information of an external origin are

controlled, - see below

Competence/awareness: Where sampled effective processes for the identification and delivery of relevant technical competencies were noted to be in place (records to be reviewed at Stage 2) .

Processes for identifying and conducting awareness/training tool box talks was viewed as implemented, and noted to include for waste storage, spills, with a noise TBT planned to be rolled out.

A new Environmental Awareness training package is in place. This is planned for role out to site managers/office, and to site personnel via a toolbox talk.

Internal audit procedure and EMS internal audit schedule are in place. An initial EMS audit of the Woodcote Quarry was conducted in January 2021. Full EMS audits are planned for Woodcote in February, and for Cornetts End Quarry in April 2022, with these conducted by 2nd party auditor/consultant. Internal auditor training is planned for the Compliance Team (9001 QMS internal audit – Feb 22, EMS Auditing for QMS auditors). Audits are to include a compliance review of applicable legal requirements, and relevant clauses of the standard e.g. training.

Management Review was conducted & attended by the top management in January 2022. An agenda/minutes of the review are documented, however this requires amendment, see below -

Monitoring & Measurement - Site monitoring conducted e.g. noise, and in relation to Objectives / KPI's. Processes are yet to be defined in the EMS Manual e.g on site noise monitoring, habitat management plan, site environmental checks

Non-conformance and corrective action process procedures are documented, which include the processes for which NC's can be raised. A new internal audit action plan is in place for recording non-conformance's (not yet implemented) - see below

Continual Improvement: the EMS is currently not fully implemented to demonstrate this, however CI processes are documented in the EMS Manual

### Areas for attention:

**Clause 7.4.1 Communication** - process have not been defined in the EMS, these are to include on what is communicated; when it is communicated; whom it is communicated; and how it is communicated. Ensure these include for enabling personnel to contribute to continual improvement - **new Minor NC 4854914\_COVSSZ08**

**Clause 7.1 Documented Information** 1) A number of processes are not documented in the EMS/EMS Manual: i) responsibilities for updating legal register ii) how the EMS scope is made available to interested parties iii) aspects responsibilities/frequency for conducting review iv) reference to objectives document v) reference for recording actions vi) reference of audit procedure/ programme, vii) frequency for conducting & required attendees for management review, and viii) reference to non-conformity/action reporting documents

2) It could not be demonstrated that the process for the identification and control of documented information of an external origin are defined in the EMS - **new Major NC 4854914\_COVSSZ09**

**Clause 9.3 Management Review** - whilst a management review has been conducted the agenda of the review does not cover all requirements of clause 9.3, should include (but not limited to) changes in aspects, compliance obligations, interested parties, internal/external issues, complaints, compliance evaluation, opportunities outputs, strategic direction and process performance - **new Major NC 4854914\_COVSSZ10**

**Clause 10.2 - Non-conformity and corrective action** - Processes for how non-conformity actions are documented are not identified in the EMS e.g. incidents/near miss forms, complaints log, audit action plan log. There is no clear provision for identification of non-conformity cause, determination if similar non-conformities

exist/occur, and for the effectiveness of corrective actions within the new audit action plan log - **new Major NC raised 4854914\_COVSSZ11**

Ensure environmental awareness training & TBT's (dust & air quality) are rolled out as planned, prior to Stage 2 - LRQA to follow up at Stage 2  
 Ensure audits are conducted as planned, and include relevant compliance review detail - LRQA to follow up at Stage 2 audits

<b>Assessment of:</b>	Site Operational Controls: Woodcote Quarry Operational Controls (Site Visit)	<b>Assessor:</b>	Stella Smith
<b>Auditee(s):</b>	Laura Hands David Albrighton Sophie Hughes Paul Lagram Sean Crowley		

### **Audit trails and sources of evidence:**

#### General EMS Procedures

Procedure 006 Handling Waste Materials  
 Procedure 012 Environmental Impacts from Emergencies  
 Procedure 010 Site Storage, Stripping and Restoration of Soil  
 EMS All Site General Site Operations  
 Procedure 297 EMS Site Vehicles  
 Procedure 01 Air Emissions - including for conveyors, crushers, stockpiles, roads etc  
 Procedure 006 Handling Waste Materials

#### Woodcote Wood Quarry Site Visit

Site Tour - Water sump, site water management, wheel wash, Engineers Workshop, Bulk Fuel Storage, On Site Generators (2), Quarry and Haul Roads, Tree screening and bunding, Overview of quarry operations & plans; Overview of wildlife/habitat, noise, and dust; waste storage; spill kits, silt press operations; compressor, water treatment plant  
 NRS Aggregates Upper Tier Carrier, dealer, broker registration valid until 1/08/2022  
 Site plant schematics  
 Shropshire Council planning consent 1703661/ETA dated 26/07/2017  
 Woodcote Wood Quarry Bird Mitigation Scheme  
 Woodcote Wood Quarry Habitat Management Plan Rev 09 Sept 2018  
 Archaeological Written Scheme of investigation for a Programme of Archeology ical Works  
 Noise Monitoring 2022 – including for site boundary/road, silt press etc  
 Processing Plan  
 Site photographs including bat boxes  
 Fuel Tank inspection reports for 2 gas oil tanks, portable tanks – 14/1/2022

Geotechnical Inspections 2021 8/11/2021, 1/11/2021, 27/11/2021 and 25/10/2021 – including various checks including settlement lagoon, site screening bunds  
 Stafsur Land Survey Map 1211a-0 Rev 0  
 Perimeter Inspections 2021 & 2022 - including perimeter fencing, stonewall, tree line, entrance gate etc  
 Wash Plant Checklist – including pumps, chutes, rollers, conveyor belts, log washer, thickening tank valves  
 NRS Woodcote Quarry Testing of Emergency Response carrier out 6/2/2020  
 Vehicle Daily Safety Check Sheet 31/2/2022  
 Toolbox Talks Pollution Control & Pollution Prevention Spills  
 Toolbox Talks training records – 2019  
 Risk Assessment for Re-fuelling Mobile Plant; Safe Systems of Work 27/2/2020  
 James Rollason waste transfer note (metal0 dated 18/10/22, 29/10/21, 5/4/19, 4/4/19)  
 James Rollason upper tier carrier dealer broker registration valid until 21/2/2022  
 Finning CAT Preventative Maintenance Agreement 15/7/2019  
 Maintenance Planning Board  
 Nicholas Hydraulic compressor service report dated 11/3/21 and 9/9/21  
 CMS Cepco 16/5/21  
 Woodcote Wood Quarry Site Induction for Visitors and Contractors

## **Evaluation and conclusions:**

### General Operational Controls

Where sampled effective EMS operational procedures and processes are documented. Both quarries operate under planning consents and relevant management plans. Stock measurements are taken for planning purposes. Procedures for site storage, stripping and restoration of soil are in place. It was noted that there is no dust monitoring requirements, with noise monitoring conducted at sample locations, It was reported that there are no outsourced processes

### Suppliers/Customers

Suppliers are managed by group /locally at site (contractors etc), and an approved supplier was reported as implemented. This will be reviewed at Stage 2, including for haulage companies  
 Customer requirements include for ISO14001 and material specifications.

### Woodcote Wood Quarry Site Visit / Operational Controls

A very high standard of housekeeping was demonstrated during the site tour. A very good awareness of local habitat management, noise and dust mitigation measures, and GW protection measures were demonstrated. A Wheel wash facility is on site, & water bowing conducted when required. Site screening and bunding is in place. Bat boxes have been installed within adjacent trees.

All site water is pumped to the settlement lagoon & then treated for re-use. The GW Abstraction was reported as not used.

Diesel fuel tanks (2) and oils were noted to be stored appropriately (bunded etc), with fuel tank inspections conducted for all bulk /mobile storage tanks.

Two site generators are operational, however these are not permitted, - see below

Regular noise monitoring is conducted, with no issues reported.

Applicable environmental pollution and spill prevention tool box talks are in place with these last communicated in 2019. Spill kits are located around the site in pertinent locations. No spills testing or spill kit checks are conducted - see below

The site operates under a Shropshire Council planning consent (issued in 2017). The LA have not visited site since the site started operations in 2019. No planning consent issues were reported.



Weekly Geotechnical Inspections and Perimeter inspections, and wash plant inspections are conducted which were noted to be very detailed. EMS monthly environmental checks & the EMS Log Book have not been completed & it was noted that current site inspections include alot of the EMS check requirements, and more detailed. There are plans to re-align these prior to Stage 2 - LRQA to follow up at Stage 2

No specific environmental contractor competency records are required, however competencies are checked with RAMS and setting up service agreements. Issues with site contractor induction identified, - see below

Waste records for metal waste have been retained. Issues with waste management are identified, – see below

Where sampled effective processes for conducting and retaining maintenance records are in place.

### **Areas for attention:**

**Site Generator Permits Clause 6.1.3:** Two site generators are operational at Woodcote Quarry, with 1 used for electricity generation, and the other as a backup, with these in operation since 2019.

It could not be demonstrated that either of the generators have a Local Authority permit for operation, when it is believed this is required to meet compliance of the 'Medium Combustion Plant Directive'. Ensure that requirements of the MCPD are fully evaluated, and that environmental permits are obtained from the Local Authority. Ensure generator operations are identified in the legal and aspects register. – **new Major NC 4854914\_COVSSZ12**

**Emergency procedure testing Clause 8.2:** No environmental emergency procedure testing e.g spills test, has been planned for and conducted. No spill kit checks have been completed as required within the EMS – **new Major NC 4854914\_COVSSZ13**

**Habitat Management Plan Clause 9.1.1** - During discussions in relation to the Habitat Management Plan, it was demonstrated a number of requirements have been fulfilled, however no review of completion/outstanding actions has been conducted – **new Minor NC 4854914\_COVSSZ14**

**Waste Management Clause 6.1.3** – 1) General waste was reported as disposed of by site employees (off site), however movements of all site waste off site requires to be controlled adequately to ensure compliance with waste regulation. Therefore a waste contract requires setting up with an authorised waste contractor, ensuring that carrier registration, and site permit checks are conducted 2) Site contractors dispose of generated waste during servicing e.g. compressor oil waste, however no waste records for this waste have been retained, and waste disposal is not included in the service agreement contract.3) 'Procedure 006 Handling of Waste' requires inclusion for conducting waste carrier registration and site checks - **New Major NC 4854914\_COVSSZ16**

**Contractor Induction Clause 7.3/8.1** All contractors are communicated the requirements of the Site Induction for Visitors and Contractors, with this including reporting of incidents and spills. This does not communicate relevant requirements of the Environmental Policy, general EMS requirements and any other applicable procedures e.g. noise, waste – **new Major NC 4854914\_COVSSZ15**

It would be beneficial to print out spill procedures to go in the file – Opportunity for Improvement

## 04. Next visit details

### Theme(s) for Next Visit

Implementation of the EMS against the clausal requirements of ISO14001: 2015.  
2 day Stage 2 audit to sample 1 sites. 1 day remote, 1 day at site.

<b>Standard(s) / Scheme(s)</b>	ISO 14001:2015	<b>Visit type</b>	Stage 2		
<b>Audit days</b>	2.00 DAY	<b>Visit start / end dates</b>	01-March-2022 / 02-March-2022		
<b>Team</b>					
<b>Site</b>		<b>Audit days</b>	<b>Delivery Method</b>	<b>Remote Effort</b>	<b>Activity codes</b>
19 Woodcote Hill, Shifnal, GB		1.00 DAY	Onsite	0 DAY	101103
NRS House Site 7, Coventry, GB		1.00 DAY	Remote	1.0 DAY	101103



## 05. Appendix



## **Audit Planning Programme and Visit Assessment plans**

Audit Planning Programme and visit Assessment plans are contained within the excel document LRQ00003797\_APP\_MS.xlsm

## **Report Considerations**

There has been no deviation from the original assessment plan or any significant issues impacting on the audit programme. There have been no significant changes that affect the management system of the client since the last audit and the scope of certification continues to be appropriate to the activities/products/services of organisation. Stage 1 Major and Minor Non-conformances The organisation was effectively controlling the use of the certification documents and not misleading in their (online) certification statements. No previously identified nonconformities. The objectives of the visit as defined in the APP, were fulfilled during the visit.

### **Stage 1 or Focus Visit**

The amount of remote audit time for the next cycle, is expected to be less than 50%. The organisation the ability to access and present information, images or video from relevant locations to undertake an effective remote assessment. The plan is to use TEAMS

### **Remote Audits**

ICT use was assessed, confirmed before the visit and effectively used during the audit using TEAMS.

### **Outside of Regular Working Hours**

All processes can be effectively audited during normal office hours. This will be reviewed at the focus visit or if it changes.

### **Occupational Health and Safety**

This audit scope did not include Occupational Health and Safety



## **Additional information**

### ***Opportunities for improvement***

*If we identify opportunities to improve your already compliant system, we will either record them in the process table applicable to the area being assessed or in the Executive summary of the report if they can deliver improvement at a strategic level.*

### ***Confidentiality***

*We will treat the contents of this report, together with any notes made during the visit, in the strictest confidence and will not disclose them to any third party without written client consent, except as required by the accreditation authorities.*

### ***Sampling***

*The assessment process relies on taking a sample of the activities of the business. This is not statistically based but uses representative examples. Not all of the detailed nature of a business may be sampled so, if no issues are raised in a particular process, it does not necessarily mean that there are no issues, and if issues are raised, it does not necessarily mean that these are the only issues.*

### ***Legal entity***

*The accredited legal entity and client facing office that has provided the assessment service in this report is referenced in the applicable agreement for this service.*

### ***Generic audit objectives and team responsibilities***

*The generic audit objectives and team responsibilities are included in the Client Information Note 'Assessment Process'. Any visit specific objectives for the next visit will be recorded in the report of the previous visit and will be addressed through the visit plan for that visit. The assessment standard and roles of the audit team are defined in the assessment visit confirmation sent to the client.*

### ***Audit Criteria***

*The audit criteria consist of the assessment standard and the client's management system processes and documentation.*

### ***Additional observers***

*Any additional observers will be as formally communicated to the client.*

### **Note**

Information on the objectives of the various visits can be found in the Client Information included in the report or on our website [www.lrqa.com](http://www.lrqa.com). Furthermore, on the website there are Client Information Notes available for the various visit types. The audit criteria and team members date and locations are also stated on the front page of the report. Scope of certification and roles and responsibilities of the audit team members are expressed in the Audit Program Plan.