Cyfoeth Naturiol Cymru Natural Resources Wales	**EPR Compliance Assessment Report**	Report ID: BJ9681IX/0221146

This form will report compliance with your permit as determined by an NRW officer

Site	OAKENHOLT MILL			Permit Ref	BJ9681IX		
Operator/ Permit holder	SCA Hygiene Products UK Limited						
Date	09/09/2014			Time in	10:00	Out	15:00
What parts of the permit were assessed	OMA for water emissions monitoring						
Assessment	Audit	EPR Activity:	Installation X	Waste Op		Water Discharge	
Recipient's name/position	A Corbett.						
Officer's name	Alison Soper, Beth Voice			Date issued	06/10/2014		

Section 1 - Compliance Assessment Summary

This is based on the requirements of the permit under the Environmental Permitting Regulations. A detailed explanation and any action you may need to take are given in the "Detailed Assessment of Compliance" (section 3). This summary details where we believe any non-compliance with the permit has occurred, the relevant condition and how the non-compliance has been categorised using our Compliance Classification Scheme (CCS). CCS scores can be consolidated or suspended, where appropriate, to reflect the impact of some non-compliances more accurately. For more details of our CCS scheme, contact your local office.

Permit Conditions and Compliance Summary				**Condition(s) breached**
a) Permitted activities	**1.** Specified by permit	N		
b) Infrastructure	**1.** Engineering for prevention & control of pollution	N		
	2. Closure & decommissioning	N		
	3. Site drainage engineering (clean & foul)	N		
	4. Containment of stored materials	N		
	5. Plant and equipment	N		
c) General management	**1.** Staff competency/ training	A		
	2. Management system & operating procedures	A		
	3. Materials acceptance	N		
	4. Storage handling, labelling, segregation	N		
d) Incident management	**1.** Site security	N		
	2. Accident, emergency & incident planning	N		
e) Emissions	**1.** Air	N		
	2. Land & Groundwater	N		
	3. Surface water	A		
	4. Sewer	N		
	5. Waste	N		
f) Amenity	**1.** Odour	N		
	2. Noise	N		
	3. Dust/fibres/particulates	N		
	4. Pests, birds & scavengers	N		
	5. Deposits on road	N		
g) Monitoring and records, maintenance and reporting	**1.** Monitoring of emissions & environment	C3		3.5.1
	2. Records of activity, site diary, journal & events	A		
	3. Maintenance records	N		
	4. Reporting & notification	A		
h) Resource efficiency	**1.** Efficient use of raw materials	N		
	2. Energy	N		

KEY: **C1, C2, C3, C4** = CCS breach category (*** suspended scores are marked with an asterisk),**
A = Assessed (no evidence of non-compliance), **N** = Not assessed, **NA** = Not Applicable, **O** = Ongoing non-compliance – not scored

Number of breaches recorded	1	**Total compliance score** (see section 5 for scoring scheme)	4

If the Total No Breaches is greater than zero, then please see Section 3 for details of our proposed enforcement response

	INITIALS	DATE
COPY FOR PUBLIC REGISTER	AS	4/11/14
CLOSED TO PUBLIC REGISTER	JB	EDRM

Section 2 – Compliance Assessment Report Detail

This section contains a report of our findings and will usually include information on:

- the part(s) of the permit that were assessed (e.g. maintenance, training, combustion plant, etc)
- where the type of assessment was 'Data Review' details of the report/results triggering the assessment
- any non-compliances identified
- any non-compliances with directly applicable legislation
- details of any multiple non-compliances
- information on the compliance score accrued inc. details of suspended or consolidated scores.
- details of advice given
- any other areas of concern
- all actions requested
- any examples of good practice.
- a reference to photos taken

This report should be clear, comprehensive, unambiguous and normally completed within 14 days of an assessment.

Operator Monitoring Assessment (OMA) for emissions to water.

Full details in audit report.

One critical element was found to be unsatisfactory, hence a Category 3 breach of permit has been recorded:

Breach of Permit condition 3.5.1 - There was a lack of evidence to demonstrate that the analytical methods used were in accordance with guidance note M18. The in-house methods were written in a work instruction but did not refer back to a recognised standard. There has been a change in external lab since Improvement conditions 1 and 3 were agreed after the last permit review. The list of methods provided by Derwent Environmental Testing did not refer back to the standards listed in M18, and although they are all UKAS methods there was no way of verifying that they are correct for the determinants required.

Recommendations:

1. In-house methods need to refer to the standards they follow and a system of review should be set up to ensure that they stay compliant with those standards.
2. Regular checks should be carried out to ensure that all staff carrying out in-house sampling and analysis are following the CBA correctly.
3. Implement a procedure for checking monitoring results and reporting to NRW.
4. There should be a work specification for the analysis carried out by the external lab. This should include any relevant instructions for the transport of samples, eg refrigeration. It should also specify the methods to be used.
5. There should be a schedule for the monitoring within the EMS.
6. Approach to Limit alarms should be added to the CEMS to give warning before an emission limit is breached so that action can be taken to avoid recirculating effluent where possible.

Cyfoeth Naturiol Cymru Natural Resources Wales	**EPR Compliance Assessment Report**	Report ID: BJ9681IX/0221146	
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Operator/ Permit	SCA Hygiene Products UK Limited	Date	09/09/2014

Section 3- Enforcement Response	**Only one of the boxes below should be ticked**
You must take immediate action to rectify any non-compliance and prevent repetition. Non-compliance with your permit conditions constitutes an offence and can result in criminal prosecutions and/or suspension or revocation of a permit. Please read the detailed assessment in Section 2 and the steps you need to take in Section 4 below.	
Other than the provision of advice and guidance, at present we do not intend to take further enforcement action in respect of the non-compliance identified above. This does not preclude us from taking enforcement action if further relevant information comes to light or advice isn't followed.	X
In respect of the above non-compliance you have been issued with a warning. At present we do not intend to take further enforcement action. This does not preclude us from taking additional enforcement action if further relevant information comes to light or offences continue.	
We will now consider what enforcement action is appropriate and notify you, referencing this form.	

Section 4- Action(s)

Where non-compliance has been detected and an enforcement response has been selected above, this section summarises the steps you need to take to return to compliance and also provides timescales for this to be done.

Criteria Ref.	**CCS Category**	**Action Required/Advised**	**Due Date**
See Section 1 above			
G1	C3	Methods used on site and by external contractors need to be referenced back to standard methods	30/11/14

Section 5 - Compliance notes for the Operator

To ensure you correct actual or potential non-compliance we may

- advise on corrective actions verbally or in writing
- require you to take specific actions in writing
- issue a notice
- require you to review your procedures or management system
- change some of the conditions of your permit
- decide to undertake a full review of your permit

Any breach of a permit condition is an offence and we may take legal action against you.

- We will normally provide advice and guidance to assist you to come back into compliance either after an offence is committed or where we consider that an offence is likely to be committed. This is without prejudice to any other enforcement response that we consider may be required.
- Enforcement action can include the issue of a formal caution, prosecution, the service of a notice and or suspension or revocation of the permit.

See our Enforcement and Civil Sanctions guidance for further information

This report does not relieve the site operator of the responsibility to

- ensure you comply with the conditions of the permit at all times and prevent pollution of the environment
- ensure you comply with other legislative provisions which may apply.

Non-compliance scores and categories

CCS category	Description	Score
C1	A non-compliance which could have a **major** environmental effect	60
C2	A non-compliance which could have a **significant** environmental effect	31
C3	A non-compliance which could have a **minor** environmental effect	4
C4	A non-compliance which has **no** potential environmental effect	0.1

Operational Risk Appraisal (Opra) - Compliance assessment findings may affect your Opra score and/or your charges. This score influences the resource we use to assess permit compliance.

Section 6 - General Information

Data protection notice

The information on this form will be processed by the Natural Resources Wales (NRW) to fulfill its regulatory and monitoring functions and to maintain the relevant public register(s). The NRW may also use and/or disclose it in connection with:

- offering/providing you with its literature/services relating to environmental matters
- consulting with the public, public bodies and other organisations (e.g. Health and Safety Executive, local authorities) on environmental issues
- carrying out statistical analysis, research and development on environmental issues
- providing public register information to enquirers
- investigating possible breaches of environmental law and taking any resulting action
- preventing breaches of environmental law
- assessing customer service satisfaction and improving its service
- Freedom of Information Act/Environmental Information Regulations request.

The NRW may pass it on to its agents/representatives to do these things on its behalf. You should ensure that any persons named on this form are informed of the contents of this data protection notice.

Disclosure of information

The NRW will provide a copy of this report to the public register(s). However, if you consider that any information contained in this report should not be released to the public register(s) on the grounds of commercial confidentiality, you must write to your local area office within twenty working days of receipt of this form indicating which information it concerns and why it should not be released, giving your reasons in full.

Customer charter

What can I do if I disagree with this compliance assessment report?

If you are unable to resolve the issue with your site officer, you should firstly discuss the matter with the officer's line managers. If you wish to raise your dispute further through our official Complaints and Commendations procedure, phone our general enquiry number 0300 065 3000 (Mon to Fri 08.00–18.00) and ask for the Customer Contact team or send an email to enquiries@naturalresourceswales.gov.uk. If you are still dissatisfied you can make a complaint to the Public Services Ombudsman for Wales. For advice on how to complain to the Ombudsman phone their helpline on 0845 607 0987.

OMA Report – Discharges to Water – EPR

Cyfoeth Naturiol Cymru Natural Resources Wales

Summary sheet			
Permit Number: BV3715IL/V006		Compliance Officer: Alison Soper	
Operator: SCA Hygiene Ltd		Audit team: Alison Soper, Beth Voice	
Discharge point(s): W1 W2		Others Present: Alana Corbett, Paul Blundell - SCA	
OMA Sections			SCORE
OMA 1 – Management of monitoring			72%
OMA 2 – Periodic monitoring and test laboratories			90%
OMA 3 – Continuous monitoring			100%
OMA 4 – Quality assurance			70%
	OVERALL SCORE		83%
OVERALL SITE ASSESSMENT COMMENTS			Letter Variation Enforcement

Recommendations:

1. In-house methods need to refer to the standards they follow and a system of review should be set up to ensure that they stay compliant with those standards. Similarly for methods used by the external lab. A review should be carried out to ensure that all methods are compliant with M18 guidance, or are equivalent, and are appropriate for the effluent being tested.

2. Regular checks should be carried out to ensure that all staff carrying out in-house sampling and analysis are following the CBA correctly.

3. Implement a procedure for checking monitoring results and reporting to NRW.

4. There should be a work specification for the analysis carried out by the external lab. This should include any relevant instructions for the transport of samples, eg refrigeration.

5. There should be a schedule for the monitoring within the EMS.

6. Approach to Limit alarms should be added to the CEMS to give warning before an emission limit is breached so that action can be taken to avoid recirculating effluent where posisble.

Alison Soper – Lead Auditor	**Date of Audit:** 09 Septempber 2014
	Date of Report: 02 October 2014

OMA 1: Management of monitoring		
OMA ELEMENTS	**SCORE**	**COMMENTS**
A. Documentation of management system procedures for monitoring	3	Fully controlled, documented procedures for in-house monitoring. Lacking written procedure for external lab & courier.
B. Organisational structure for monitoring	5	Responsibilities described in document + organogram on management system
C. Schedules and planning of monitoring, including contingencies	3	No specific schedule, but sampling is included in the daily / weekly task lists. Relies on Environmental Leader.
D. Monitoring records and use of monitoring data	3	Results entered into spreadsheet for daily checks, but not used for process improvement purposes.
E. Understanding the requirements of the permit and monitoring methods	4	Personnel responsible for implementing monitoring understand the permit requirements.
OMA 1 – SCORE	18/25	

SUMMARY COMMENTS FOR OMA 1

Procedures for effluent monitoring and effluent plant checks are written documents within the site electronic management system. All are controlled documents subject to regular review. The procedures are comprehensive with straightforward instructions and photographs for sampling staff to follow. COD and TSS analysis is carried out on site. Temperature and pH are continuously monitored, and all other determinants are analysed by an external lab.

There is no written work specification for the external lab analysis and the transport requirements e.g. keeping samples refrigerated.

The organisational structure for monitoring is set out in a document within the management system. The Effluent sampling procedure states who is responsible for sampling, analysing and reporting results.

There is no schedule for sampling and reporting within the management system. The procedure lists the monitoring that is required and a list is drawn up each week of jobs that are needed on each day, including the sampling, but it relies on the Environmental Leader to include the sampling, and to arrange the external monitoring.

Results are reviewed in the daily meeting. The daily sampling is carried out during the night shift to ensure that the results are ready for this. There are alarms on the continuous monitoring equipment which alarm in the DCS in the control room. The effluent is automatically sent into recirculation if the emission limits are reached, however, if approach to limit alarms were set then

action could possibly be taken to avoid the need to recirculate.

Monitoring results aren't trended for process control, but there is the facility to do this in the DCS. A quarterly review is produced for the permit which could be improved for process control / improvement purposes.

There is a reasonable understanding of the monitoring requirements and the importance of MCERTS. This has been cascaded to all staff on site.

OMA 2: Periodic monitoring and test laboratories		
OMA ELEMENTS	**SCORE**	**COMMENTS**
A. Sampling provisions *Critical Element*	5	Sampling facilities are safe and fully compliant.
B. Certification of equipment	5	Flow monitoring equipment and the autosampler are MCERTS certified
C. Measurement methods and standards *Critical Element*	**2**	The external lab is UKAS accredited for all the techniques used, but not all methods are as listed in TGN M18. In-house procedures are not referenced back to standards.
D. Calibration methods *Critical element*	4	Calibration carried out to manufacturers' specifications. Don't use QC charts
E. Frequency of maintenance and calibration	5	All equipment calibrated and maintained to manufacturers' specification
F. Reliability of equipment (data availability)	5	Equipment > 95% reliable
G. Breakdown response	5	All equipment can be returned to operation within 24 hours of a breakdown.
H. Traceability	5	All equipment calibrated to traceable standards.
OMA 2 – SCORE	36/40	

SUMMARY COMMENTS FOR OMA 2

Samples are taken from a designated point with a tap at the effluent treatment plant. There is also an MCERTS certified autosampler taking flow proportional samples over a 24 hour period. Samples are taken for off-site analysis when the courier arrives on site so there isn't a need to keep them refrigerated, however it was not known whether the samples are kept cool during transit to the lab several hours drive away.

Critical Element - There is insufficient evidence to demonstrate that the methods used by the external and in-house lab are compliant with M18. The in-house work instruction does not refer

back to a standard, and the UKAS methods listed by DET are not referenced to M18 methods. Without this evidence there is no way of knowing whether the methods are correct and this will need to be investigated as a priority.

The flow monitor, autosampler, pH and temperature continuous monitors are all MCERTS equipment. All equipment is calibrated at least in accordance with the manufacturers' specifications. The intention is to put all the requirements into the SAP system to ensure they always get done; they currently sit in the maintenance system.

The equipment in the lab is calibrated regularly, the COD colorimeter by Hach and other equipment – balances, oven etc by a specialist company. All were in date. A blank sample is tested every day for COD.

The equipment is realiable, backed up by having critical spares on site. A spare temperature probe is kept in use within the process and can be moved to the effluent plant if needed. There is a 24 hour response contract for the flow meter and autosampler. Spares for the pH probe can be obtained within 24 hours. On site engineers carry out maintenance and repairs, where possible, and are fully competent.

Calibration is carried out to traceable standards. Standards for pH calibration were within date.

OMA 3: Continuous monitoring		
OMA ELEMENTS	**SCORE**	**COMMENTS**
A. Provisions for monitoring and location of CWMs *Critical element*	5	
B. Certification of CWMs	5	
C. Measurement methods and standards *Critical element*	5	
D. Calibration methods *Critical element*	5	
E. Frequency of maintenance and calibration	5	
F. Reliability of equipment (data availability)	5	
G. Breakdown response	5	
H. Traceability	5	
OMA 3 – SCORE	40/40	
SUMMARY COMMENTS FOR OMA 3		
All continuous monitoring equipment meets MCERTS standards (details in Section 2 above)		

OMA 4: Quality assurance		
OMA ELEMENTS	**SCORE**	**COMMENTS**
A. External quality control schemes	4	The external lab is UKAS accredited for all analytical methods used. SCA has ISO 14001 and ISO 9001
B. Internal data quality control	3	DET has UKAS accreditation. Internal QC is limited
C. Competence of monitoring personnel	3	Sampling and analysis personnel have some training, but competency is not tested.
D. Auditing of monitoring	3	A documented programme of audits is carried out, but there is no checking of adherence to analytical procedures.
E. Audit compliance	5	Audit results documented and followed up.
F. Reporting	3	No uncertainty figures on DET reports No procedure for submitting results to NRW
OMA 4 – SCORE	21/30	

SUMMARY COMMENTS FOR OMA 4

SCA have ISO 14001 certification for their EMS. Derwentside Environmental Testing (DET) have UKAS accreditation for all the analytical techniques used.

There is limited quality control on the analysis carried out in-house. Samples have been sent for cross checking by the external lab in recent months for COD and TSS, but AQC charts aren't used.

Personnel carrying out the sampling and analysis receive in-house training, however the training records could be improved. There is a comprehensive work instruction (CBA), but there is no system for checking that staff are following this correctly. They do sign a record to show that they have read the document when it is reviewed significantly and a spreadsheet record is kept of who needs to sign and who has signed.

There is a programme of audits within the EMS and findings are documented and followed up appropriately. There are no checks of whether staff are following the CBA correctly, or of whether individuals are consistently obtaining accurate results. It is recommended that checks are carried out and documented for all staff carrying out analysis in-house.

Monitoring reports are generally submitted to NRW on time, however this is reliant upon the

Environmental Leader, there is no procedure regarding this permit requirement. Results are sent by e-mail from the external lab, but contain no uncertainty data. A full report should be submitted which includes the LODs for each determinant and uncertainty data. A procedure for checking data, and querying if necessary, before sending the completed reports to NRW should be included in the EMS.