



Audit Report for Intertissue Limited

Visit Number 4 Surveillance Audit

For training on this management system and for all your training needs, please visit the SGS Academy at www.sgs.co.uk/trainingbrochure

To subscribe to the SGS newsletter please visit <http://www.sgs.co.uk/en-GB/Our-Company/E-Subscriptions.aspx>

Management System Certification Audit Summary Report

Organisation:	Intertissue Limited		
Address:	Head Office/ site: Brunel Way Baglan Energy Park Neath Wales SA11 2HZ		
Standard(s):	ISO 14001:2004 - Environmental Management System Certification	Accreditation Body(s)	UKAS
	BS OHSAS 18001:2007 - Occupational Health and Safety Management System Certification		UKAS
Representative:	Jeff Hall and Kerry MacKinnon		
Site(s) audited:	Baglan Energy Park	Date(s) of audit(s):	30 th March and 1 st & 2 nd April-14
EAC Code:	07	NACE Code:	21.12
		Technical Area Code:	EM10, OH8
Effective No. of Personnel	304	No. of Shifts:	24 hours (various)
Lead auditor:	David Jenkins	Additional team member(s):	
Additional Attendees and Roles			
This report is confidential and distribution is limited to the audit team, client representative and the SGS office.			

1. Audit objectives

The objectives of this audit were:

- to confirm that the management system conforms with all the requirements of the audit standard;
- to confirm that the organisation has effectively implemented the planned management system;
- to confirm that the management system is capable of achieving the organisation's policy objectives.

2. Scope of certification

ISO 14001:2004 -
Environmental Management
System Certification

Production of tissue paper of pure cellulose, development and production of toilet paper, kitchen towel, facial tissues and handkerchiefs.

BS OHSAS 18001:2007 -
Occupational Health and
Safety Management System
Certification

Production of tissue paper of pure cellulose, development and production of toilet paper, kitchen towel, facial tissues and handkerchiefs.

Has this scope been amended as a result of this audit?

Yes No

This is a multi-site audit and an Appendix listing all relevant sites and/or remote locations has been established (attached) and agreed with the client

Yes No

3. Current audit findings and conclusions

The audit team conducted a process-based audit focusing on significant aspects/risks/objectives required by the standard(s). The audit methods used were interviews, observation of activities and review of documentation and records.

The structure of the audit was in accordance with the audit plan and audit planning matrix included as annexes to this summary report.

The audit team concludes that the organisation has have not established and maintained its management system in line with the requirements of the standard and demonstrated the ability of the system to systematically achieve agreed requirements for products or services within the scope and the organisation's policy and objectives.

Number of nonconformities identified: 0 Major 0 Minor

Therefore the audit team recommends that, based on the results of this audit and the system's demonstrated state of development and maturity, management system certification be:

Granted / Continued / Withheld / Suspended until satisfactory corrective action is completed.

4. Previous Audit Results

The results of the last audit of this system have been reviewed, in particular to assure appropriate correction and corrective action has been implemented to address any nonconformity identified. This review has concluded that:

- Any nonconformity identified during previous audits has been corrected and the corrective action continues to be effective. (Refer to Section 6 for details)
- The management system has not adequately addressed nonconformity identified during previous audit activities and the specific issue has been re-defined in the nonconformity section of this report.

5. Audit Findings

The audit team conducted a process-based audit focusing on significant aspects/risks/objectives. The audit methods used were interviews, observation of activities and review of documentation and records.

The management system documentation demonstrated conformity with the requirements of the audit standard and provided sufficient structure to support implementation and maintenance of the management system. Yes No

The organisation has demonstrated effective implementation and maintenance / improvement of its management system and is capable of achieving its policy objectives. Yes No

The organisation has demonstrated the establishment and tracking of appropriate key performance objectives and targets and monitored progress towards their achievement. Yes No

The internal audit program has been fully implemented and demonstrates effectiveness as a tool for maintaining and improving the management system. Yes No

The management review process demonstrated capability to ensure the continuing suitability, adequacy and effectiveness of the management system. Yes No

Throughout the audit process, the management system demonstrated overall conformance with the requirements of the audit standard. Yes No

Certification claims are accurate and in accordance with SGS guidance and the organisation is effectively controlling the use of certification documents and marks. N/A Yes No

6. Significant Audit Trails Followed

The specific processes, activities and functions reviewed are detailed in the Audit Planning Matrix and the Audit Plan. In performing the audit, various audit trails and linkages were developed, including the following primary audit trails, followed throughout:

- Relating to Previous Audit Results: *(additional text required against italic font)*

All observations, opportunities for improvement and nonconformities reviewed and suitably addressed:

Yes

No

None raised

Evidence:

- Confined Space Regs have yet to be evaluated for compliance but there is now a requirement to step up the compliance checks across the Legal Register as evidence was limited at this visit. Purchase Order in place for Consultant to carry out full review. Follow up at next visit. V3 update. New evaluation system is currently in draft form and is being rolled out. It is expected that the final draft will be completed by year end. Currently DSEAR, Noise and LOLER have low scores but are WIP. Review at next visit. **V4 update. Confined space now evaluated for compliance using the new compliance system with a score of 8.**
- The integrity of underground tanks are to be tested, currently trying to source company. V3 update. No further progress, to be looked at again. **V4 update. Annual inspection now set up and a Maintenance Technical Card System is in place with most recent inspection evidence sent to the EA. This was in response to a recent visit for feedback against an EPR requirement, and a C3 breach was raised by EA to be addressed by 6th Feb but extended to March. 3 x sumps for conversion and 1 for effluent plant.**
- The current Coshh RA template does not clearly show if the hierarchy of risk controls has been considered. This must be in place by the next visit. V3 update. Hierarchy consideration now being given as evidenced in the Coshh Register (HSE REG-10), although this remains WIP as each Coshh RA comes up for review. Review next visit. **V4 update. Most Coshh RA's now revised with hierarchy section. Lab chemicals not yet changed but all other areas done 90% complete. Sodium hypochlorite may be substituted by a chlorine free biocide for use on cooling tower and fresh water systems. Meeting with GE in May for further progress.**
- Boiler is to have a working platform erected to prevent falls. RA completed which resulted in need for platform to be built, currently WIP 2-3 months. V3 update. Drawings completed but platform not in place due to key personnel changes in Maintenance / Engineering Department. Interim risk control measures to be implemented for service engineers. **V4 update. All work now completed.**
- A toolbox talk is to be rolled out to all employees who carry out guard / interlock inspections to cover PUWER requirements, and to remind everyone on the consequences of not checking systems properly. Please see NCR above in Section-7. V3 update. TBT's recently issued on the use of machine guarding and any required checks, dated Nov-13 which is currently being rolled out. Review at next visit. **V4 update. TBT's now completed by supervisors and evidence sampled during site tour.**
- Ensure that the use of manual pallet lifting equipment is captured by a PUWER RA before the next visit. V3 update. Not yet completed. Review at next visit. **V4 update. SW005 in place to capture this concern.**
- DDA now replaced by the Equality Act. To be added to the Legal Register when the consultant revises the system. V3 update. Not yet added but will be in new system, and then evaluated for compliance. **V4 update. Now added and assessed accordingly.**
- Please consider periodic formal inspections of all site ladders and gantries eg. ladders on Effluent Plant, Sprinkler tanks, roof access from Papermill etc. V3 update. WIP review at next visit. **V4 update. Ladder-Tags fitted to most ladders but not all. Decision to be made on whether checks will be carried out by the Engineering Department, or Bureau Veritas.**

- Lifting cradle in Papermill to receive CE Marking. V3 update. Lloyds British completed LOLER examinations recently with a CAT B finding noted. Review follow up of CAT B at next visit. **V4 update. Now addressed and closed out.**
- Monthly management meetings no longer formally held. Please review this to help ensure internal and external audit findings are monitored for timely close out, and to track progress against HSE objectives etc. **V4 update. Monthly meetings reinstated in Jan-14. Feb-14 minutes sampled where top management involvement was very clear. However, March and April meetings have not taken place. Forthcoming MR to include H&S objectives set by Italy.**
- Some long standing internal audit actions are open eg. back to early 2013. **V4 update. Most 2013 actions now closed out where possible. 2014 CAR Register generally well controlled with new % column added to show more accurate progress.**
- H&S objective progress requires updating via MRR-003, as it was noted they had not been recently reviewed. **V4 update. MRR-003 records have been updated although evidence is limited. Italy are currently defining new KPI's for H&S but these are not yet available. The Management Review may be delayed because of this.**
- C357 – finger fracture. Please review RA following investigation. **C357 now investigated accordingly and closed out.**
- Racking Inspection Records from Zurich to be reviewed at next audit, as the most recent inspections have not yet been placed on Crimson. **V4 update. Now with Bureau Veritas and the new electronic system was sampled for racking.**
- FLT defects found by Zurich. Please ensure that these are followed up and completed. **Not currently up to date due to change to new BV system which has no facility to follow up adverse findings.**
- First aid kits and stock in stores to be checked, to ensure that they have not exceeded their expiry dates. **All reviewed accordingly.**
- Review storage of reels to ensure that reels of similar diameter are stacked on each other in order to prevent toppling. **No concerns noted at this visit.**
- Review inspection of ladders to ensure they are suitability identified, e.g. there are two PM10s. **Now rectified and re-numbered.**
- Review LOLER colour coding tagging system, viewed two different colours currently in use (eg. blue and yellow). **New BV tags remove this concern but old Zurich colour-coding signs to be removed.**
- Please add all SGS findings to internal tracking system to ensure regular monitoring of corrective action completion takes place. **All added.**

- Relating to this Audit: *(additional text required against italic font)*

Changes:

Level of Integration?	<input type="checkbox"/> N/A	<input type="checkbox"/> Basic	<input checked="" type="checkbox"/> High
Key/Significant Organisational changes? (eg. key personnel, client activities, management system)		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Key/Significant System changes?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<i>Sample reviewed:</i>			
HSE support (Karyss) now left the organization. New paper mill manager in place, Bob Harvey now left.			

Management Review:

Undertaken at defined intervals?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Date of last review:</i>	No full MR since before last SGS visit.		
Attended by Senior Management?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
All required inputs/outputs?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Evidence:</i>			
Monthly meeting minutes sampled for Feb-14.			

Internal Audits:

Programme/schedule in place, audits conducted on time?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Reported satisfactorily, containing objective evidence and showing impartiality?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Actions identified, suitably addressed within defined timescale?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Sample reviewed:</i>		
The 2013 programme was deemed as complete against the ongoing 2012 – 2014 schedule. The current 2014 plans were generally up to date. The audit reports were found to add value to the continual improvement process. Audit trail; <ul style="list-style-type: none"> • Buildings CEF - Various NCR's and OBS's identified • Converting Line-1 – OBS's identified • Waste Management – OBS's identified • Stack Emissions – No CAR's / OBS's identified Most 2013 CAR's now closed out where possible and the 2014 CAR Register is generally well controlled with a new % column added to show more accurate progress.		

External communications/Customer feedback (incl. comments/suggestions):

Received from customer, interested parties?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Reported, reviewed and investigated?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Actions identified, suitably addressed and communicated within defined timescale?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Sample reviewed:</i>		
Fire Service visited for training exercise. EA visit re permit compliance and concerns with underground tanks. EA inspected radiation compliance. FLT gas supplier changed to Flo-Gas. Safety rep meetings on track, Feb-14.		

Customer satisfaction process (9001):

Received from customer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Results reviewed, used for continual improvement of the effectiveness of the QMS?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Sample reviewed:</i>		

Objectives:

Measurable objectives, control objectives, annex A clearly defined?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Established at relevant functions and levels? (9001)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Programme/Action Plan established and adhered to? (14001/18001/50001)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Sample reviewed:</i>		
The 2013/14 O&T programmes were sampled to verify levels of achievement. Objectives have been established around the Group PABIAC programmes documented using HSE-MRR-003. H&S – These are for accident reduction initiatives, occupational health initiatives, and general improvements in employee awareness and training levels. Environmental objective progress was sampled to confirm 2013/14 progress against energy consumption targets set for gas, electric and water by Group etc. <ul style="list-style-type: none"> • Obj-1 – Waste to landfill reduction / increase recycling. Currently just 1% of all waste goes to landfill, 58% is recycled, 41% is waste to energy. Seeking alternative routes for sludge disposal and full review of waste streams to be done in 2014. New 2014 target is to increase recycling from 58% to 59%. • Obj-2 – Water consumption target is 5 m³/ton for paper mill. A monthly average of 4.83 m³/ton achieved in 2013, Reduce canal water and use rainwater. Target remains the same in 2014. • Obj-3 – Paper mill Gas consumption 188 Nm³/ton, normalised meters cubed per tonne. 162.84 Nm³/ton achieved in 2013. Process changes achieved; average moisture in paper changed, steam pressure on Yankee increased from 4.8 to 5% but currently 5.6%. The 2014 target is 178 Nm³/ton. • Obj-4 – Paper mill consumption of Energy 0.800 mega watt hours per tonne with 0.724 achieved in 2013. The 2014 target is 0.750 mega watt hours per tonne and initiatives include; LED lighting and 		

potential to preheat water.

- Obj-5 – Converting Energy consumption target of 145 kilowatt hours per tonne with 136.83 achieved in 2013. The 2014 target is 140 kilowatt hours per tonne; lean manufacturing initiatives being considered.
- Obj-6 – Rainwater harvesting installation to collect all water from roof using North Pond. Project now completed.
- Obj-7 – Co2 reduction by transporting finished product more efficiently. 2014 initiatives include; FLT fleet change to electric to help reduce C02 emissions. In addition, longer trailers are being investigated along with major supermarkets for transporting finished goods etc.
- Obj-8, Replace Sodium Hypochlorite with chlorine free substance for use in cooling tower.

Monthly energy consumption record sampled, along with monthly waste statistics which are sent to Italy.

Legislation:

Demonstrated awareness of all applicable legal and other requirements?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Arrangements in place to monitor amendments to legal and other requirements?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Sample of recent changes reviewed: See below.</i>		
Full evaluation of compliance taken place at periodic intervals? (14001/18001)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Records of the results (including evidence) of evaluations retained? (14001/18001)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Actions identified and addressed? (14001/18001)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Sample reviewed:

¼ updates now sent by external contractor. Very comprehensive compliance documents were presented and both up to date.

Total H&S compliance is 8.4 (green) with no outstanding NCR's. Version 5. Physical agents score 7.6 eg. noise, with vibration at 8 and optical radiation 10. Equality act added. Confined space 8

Total ENV compliance is 9.4 (green) with no NCR's. Version 5. Waste scores 9.4 and is the lowest eg.

Packaging essential waste at 6 due to packaging design issues but currently working with technical dept to address the issues, WEEE score 8 and EPB 8.

Incidents, complaints, correction and corrective action (dependent on standard):

Identified, investigated, actioned, reported in accordance with requirements?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Actions identified and addressed?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Sample reviewed:

C357 sampled and now fully investigated and closed out. CON005 RA is deemed suitable.

Environmental Incidents – several spills recorded Jan-14 ink spill from IBC on lorry 095, hydraulic leak on paper mill 096, oil leak from cleaning machine 097, and ink spill from compactor 098.

No external complaints received since last visit, and no Permit breaches noted.

Accident / Incidents reported in 2014 YTD total 16 (53 this time last year), with no Riddor's. P211 sampled.

The following were sampled for compliance; Incidents – 12 YTD eg. FLT hitting sprinkler pipe and steam pipe, fire incidents 7 YTD eg. Papermill issues, and unsafe acts 14 YTD eg. Crane door issue and general waste tipping concern. The Accident & Incident Register 2013/14 was sampled and found to be well controlled.

Near Misses and Unsafe Acts are well reported, and the ratio of major accidents, to Riddor's, to minor accidents and to near misses, appear to be well balanced and shown by Frank Bird Pyramid.

Monthly Safety Tours are carried out and the following were sampled. Root cause analysis and corrective / preventive action levels are good and KPI's comprehensive.

Preventive action:

Identified, actioned, reported in accordance with requirements?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Actions identified and addressed?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Sample reviewed:

Regular Safety Tours using HSE MON 096 Safety Tour Record Dec-13. Daily walk-around by supervisors reported at morning meetings.

Aspects/Hazards/Risks (Not Required for ISO9001):

All Aspects/Reasonably Foreseeable Hazards identified?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
All Aspects/Consequential Risks evaluated?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Appropriate control measures applied?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Suitable monitoring in place?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Review undertaken at defined intervals?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Sample reviewed:

Aspects Register Rev-6 sampled. Rainwater added and cooling tower process water rescored. Some resoring where gas meter added as better consumption monitoring, and converting softener tank added. Air emissions, waste generation, waste water all rescored.

RA's sampled to follow up previous observations, and at random at this audit, see below.

HSE REG 020 RA Register. PM004 and PM022 sampled.

Operational Audit Trails:

Additional requirements identified from the audit plan:

The following were sampled for compliance, along with external grounds, and follow up of OBS's from the previous visit in various buildings. Key findings from this visit are summarised below;

Contractor control. REG018 list all contractor approval List, Contractors Questionnaire. PRO016 Site Regulations. PRO 024 procedure in place. Sampled compliance for; FPS, SWFT, PAL, Compressor Solutions, Countrywide, and Heat Pump Services.

Packaging Waste – Horwich now included in obligations for packaging but no submissions needed. 2013 data submitted for 3390 tonnes total obligation.

Fire Related Equipment Management – Escape routes, exit doors, fire signage, confirmed as compliant in areas visited. The sprinkler pump and riser checks were up to date, as were; fire alarm servicing, fire door checks, hydrant checks, alarm call point tests, and emergency lighting.

Hazardous Waste Management – Biffa (oily rags, aerosols, ink containers, WEEE, old chemicals or oil drums). WCN and WCL sampled for compliance.

Premises Code: NFE529 exp, 30/07/14. Waste segregation generally of a good standard.

Site Serv – general waste WTN's compliant.

Sims Metal – metal waste, annual WTN compliant to 31/9/14.

Mercury Recycling – light tubes, WCN and WCL compliant.

Conversion Line 6 – Guarding check sheets sampled along with Crane inspection pads, housekeeping, core making areas, log saws, accumulators etc., and statutory inspections etc.

Rainwater harvesting system – tour of catchment area tanks completed.

Air-con / chiller management – Refrigerant Log in place, service records sampled, REFCOM evidence sampled along with C&G Level-2 evidence etc.

7. Nonconformities *(None Raised)*

8. General Observations & Opportunities for Improvement

Previous observations that require more urgent follow up.

- Formal evidence of inspections is required for review at the next visit for all site ladders and gantries eg. ladders on Effluent Plant, Sprinkler tanks, roof access from Papermill etc. This has been previously raised but not yet addressed. It was stated that Ladder-Tags had been purchased but not yet fitted to the ladders, and a decision is to be made on whether checks will be carried out by the Engineering Department, or Bureau Veritas. Please action by next visit.
- Interim management meetings had recently changed to monthly although none were conducted in March and April-14. These meetings are an additional forum to plug the gap between the annual full management review for discussing status of accidents and incidents, and ensuring internal and external audit findings are monitored for timely close out where required, and to track progress against HSE objectives etc. Please ensure these meetings cover the above topics and the forthcoming H&S objectives which are to be set by HQ in Italy.
- Once the new Group based H&S targets are known the MRR-003 records will need to be revised / updated. In addition, there may be a need for other local objectives eg. to improve compliance scores from legal evaluations such as noise which is currently the lowest at 7.6.
- FLT defects found through thorough examinations may now need a new focus to ensure they are followed up. At present. The follow up may not be timely due to change from Zurich to the BV system which has no facility to follow up adverse findings.

New observations.

- Audits of 4.5.5 and 4.4.3.2 to be added to audit plan and their audits completed before next SGS audit. A new audit of contractor control is also recommended, see comments below.
- Please also revise the CAR Register for 2013 and TYD in 2014 to ensure all entries are formally closed out.
- The audit report for Buildings C, E & F did not clearly document the consideration of 14001 related issues.
- Please review the suitability of the RAMS received from contractors to ensure they are specific to the risks of the job in question eg. Compressor Solutions, SWFT and Heat Pump Services etc.
- Document (HSE AUD 013 Rev-2) is available for PAL but they have stated that no RA's are done, no PUWER compliance and no safety inspections are carried out. Please review this with PAL as it appears to be a mistake.
- Please contact all current contractor companies to seek confirmation that their employees have been made aware of risk controls within the RAMS such as; sign-off evidence eg. FPS, Compressor Solution, PAL, Countrywide and SWFT.
- No induction records available for 2 Countrywide employees eg. P. Davies and A. Jackson.
- Conversion Line-6 findings;
 - Please review signage for fire extinguishers as some were missing.
 - A robot compound sliding door appeared to be slightly off its rails.
 - An E/stop button was damaged.
 - The emergency interlock release key had been removed.
 - Guard checks for the day had not been completed. This was later addressed.
 - Some warning light covers were damaged on a baler control panel.
 - A plastic guard on the core maker would benefit from repair.
- The 2 front tyres on the large MEWP appeared to have slightly deflated pressures. Please address before using equipment again.
- The new rainwater harvesting tank has a Davit Crane that now needs adding to the BV examination regime. The confined space may also need including in the controls.
- Compliance with the Energy Performance of Buildings Regs to be reviewed at the next visit eg. inspection of air-con systems with an output of more than 12 kW.

- Heat Pump Services to provide service and leak test evidence for each item of equipment as at present the records appear to lump areas together and it was unclear as to what had been included.
- Please confirm liability insurance evidence for PAL is suitable.
- Older versions of work permits were noted to be in use.

9. Opening and Closing Meeting Attendance Record

Name	Position	Opening	Closing
Jeff Hall	UK HSE Manager	X	X
Kerry Mackinnon	UK Environmental Manager	X	X

Audit Plan

Organisation:	Intertissue Limited		
Address:	Head Office/ site: Brunel Way Baglan Energy Park Neath Wales SA11 2HZ		
Visit Number:	5	Actual Visit Date:	5 th – 7 th Nov-14
Visit Due by Date:	30/11/2014	For auditor information only	
Lead Auditor:	David Jenkins		
Team Member(s):			
Additional Attendees and Roles			
Standard(s):	ISO 14001:2004 - Environmental Management System Certification		
	BS OHSAS 18001:2007 - Occupational Health and Safety Management System Certification		
Audit Language:	English		
Audit Scope:	ISO 14001:2004 - Environmental Management System Certification	Production of tissue paper of pure cellulose, development and production of toilet paper, kitchen towel, facial tissues and handkerchiefs.	
	BS OHSAS 18001:2007 - Occupational Health and Safety Management System Certification	Production of tissue paper of pure cellulose, development and production of toilet paper, kitchen towel, facial tissues and handkerchiefs.	

Audit objectives: To confirm that the management system has been established and implemented in accordance with the requirements of the audit standard.

Date	Time	Auditor	Area / Department / Process / Function	Key Contact
05/11/14	08.45	DJ	Arrive On Site	JH, KM
	09.00	“	Opening Meeting, Review Previous Report	“
		“	Management Review, Risk Assessments, Aspects Evaluation, Legal Requirements / Compliance, Objectives & Targets, Management Programmes, Monitoring & Measuring	“
	12.30	“	Lunch	“
	13.00	“	Internal Audits, Corrective & Preventive Action, Accidents/Incidents/Non-conformity, Consultation, Participation & Communication	“
	16:00	“	Review of Day	“
06/11/14	09:00	“	Operational Control / Emergency Preparedness Performance Monitoring / Training, Communication, Statutory Inspections and Key Records (Areas as per APM and Section-6)	“
	12:30	“	Lunch	“
	13:00	“	Op. Controls etc, (continued)	“
	16.00	“	AOB / Auditor Review / Closing Meeting	“
07/11/14	½ day	“	Report Writing	

Date	Time	Auditor	Area / Department / Process / Function	Key Contact

Notes to Client:

- Times are approximate and will be confirmed at the opening meeting prior to commencement of the audit.
- SGS auditors reserve the right to change or add to the elements listed before or during the audit depending on the results of on-site investigation.
- A private place for preparation, review and conferencing is requested for the auditor's use.
- Please provide a light working lunch on-site each audit day.
- Your contract with SGS is an integral part of this audit plan and details confidentiality arrangements, audit scope, information on follow up activities and any special reporting requirements.



Audit Planning Matrix

Area / Department / Process / Function	ASPECTS, RISKS, OBJECTIVES	Clauses	Visits:					
			Dates:					
			V1R	V2	V3	V4	V5	V6
Auditor(s):			Nov-12	May-13	Nov-13	May-14	Nov-14	May-15
			DJ	DJ	DJ/FL	DJ	DJ	DJ
SHE Dept	Manual & Procedures Review	ALL	X	X	X	X	O	O
	Aspects Evaluation/Risk Assessment	4.3.1	X	X	X	X	O	O
	Legislation/Compliance	4.3.2, 4.5.2	X	X	X	X	O	O
	Audits/Management Review	4.5.5, 4.6	X	X	X	X	O	O
	Incident Investigation, NC'S, C/A, P/A	4.5.3	X	X	X	X	O	O
	Objectives, Targets & Programmes, Monitoring & Measurement	4.3.3, 4.5.1	X	X	X	X	O	O
	Training, Awareness & Competence	4.4.2	X	X	X	X	O	O
	Consultation, Participation & Communication	4.4.3	X	X	X	X	O	O
	Document Control/Records	4.4.5, 4.5.4	X Minor	X	X	X	O	O
Building C (Parent Reel Stores)	SWPs, EOPs, RAs, Traffic, FLT	4.3.1, 4.4.6			X			O
Building E (Raw Materials Warehouse / Converting Workshop / Spares Stores)	SWPs, EOPs, RAs, Traffic, FLT	4.3.1, 4.4.6			X			O
Building F1 (Finished Goods Warehouse / Logistics / Transport)	SWPs, EOPs, RAs, Traffic, FLT	4.3.1, 4.4.6			X			O
Building F2 (Finished Goods Warehouse)	SWPs, EOPs, RAs, Traffic, FLT	4.3.1, 4.4.6			X			O



Audit Planning Matrix

Building F3 (Finished Goods Warehouse)	SWPs, EOPs, RAs, Traffic, FLT	4.3.1, 4.4.6						O	O	
Building F4 (Finished Goods Warehouse / Railway Track)	SWPs, EOPs, RAs, Traffic, FLT	4.3.1, 4.4.6				X			O	
Building F5 (Loading Bays / Logistics / Transport / FLT Workshop)	SWPs, EOPs, RAs, Traffic, FLT	4.3.1, 4.4.6						O	O	
Building B (Paper Mill: Engineering Workshop / Stores)	Emergency Prep – Test, Evacuation, Monitoring of Utilities, Control of Contractors, WAH, Maintenance, Performance Monitoring, Statutory Tests	4.4.6, 4.4.7, 4.5.1, 4.5.4			X				O	
Building B (Paper Mill: Laboratory)	SWPs, EOPs, RAs, Monitoring & Measurement, Emergency Prep	4.4.6, 4.4.7, 4.5.1	X					O	O	
Building B (Paper Mill: Pulp Basement / Service Areas)	SWPs, EOPs, RAs, Monitoring & Measurement, Emergency Prep	4.3.1, 4.4.6, 4.4.7, 4.5.1	X	X	X				O	
Building B (Paper Mill: Machine Level)	SWPs, EOPs, RAs, Monitoring & Measurement, Emergency Prep	4.3.1, 4.4.6, 4.4.7, 4.5.1	X		X				O	
Building B (Paper Mill: Mezzanine Level Areas)	SWPs, EOPs, RAs, Monitoring & Measurement, Emergency Prep	4.3.1, 4.4.6, 4.4.7, 4.5.1	X					O	O	
Building D (Conversion Hall) Line-1	SWPs, EOPs, RAs, Monitoring & Measurement, Emergency Prep	4.3.1, 4.4.2, 4.4.3, 4.4.6, 4.4.7, 4.5.1	X					O	O	
Line-2	As above	4.3.1, 4.4.2, 4.4.3, 4.4.6, 4.4.7, 4.5.1			X				O	



Audit Planning Matrix

Line-3	As above	4.3.1, 4.4.2, 4.4.3, 4.4.6, 4.4.7, 4.5.1	X					O	O	
Line-4	As above	4.3.1, 4.4.2, 4.4.3, 4.4.6, 4.4.7, 4.5.1		X					O	
Line-5	As above	4.3.1, 4.4.2, 4.4.3, 4.4.6, 4.4.7, 4.5.1		X Minor					O	
Line-6	As above	4.3.1, 4.4.2, 4.4.3, 4.4.6, 4.4.7, 4.5.1				X			O	
Facial Tissue Line-1	As above	4.3.1, 4.4.2, 4.4.3, 4.4.6, 4.4.7, 4.5.1	X	X					O	
Facial Tissue Line-2	As above	4.3.1, 4.4.2, 4.4.3, 4.4.6, 4.4.7, 4.5.1		X					O	
Shrink Wrapping Area	As above	4.3.1, 4.4.2, 4.4.3, 4.4.6, 4.4.7, 4.5.1	X					O	O	
Laser Guided Vehicles	Service and Maintenance	4.5.1, 4.5.4		X	X				O	
Ink Room / Dust Extraction	As above	4.3.1, 4.4.2, 4.4.3, 4.4.6, 4.4.7, 4.5.1	X					O	O	
Auto Compactor Room	As above	4.3.1, 4.4.2, 4.4.3, 4.4.6, 4.4.7, 4.5.1	X					O	O	
Offices, Welfare Areas, First Aid Room, Canteen, Cleaning Cupboard	As above	4.3.1, 4.4.2, 4.4.3, 4.4.6, 4.4.7, 4.5.1	X					O	O	
Building A1 (Pulp W/H Areas)	SWPs, EOPs, RAs, Monitoring & Measurement, Emergency Prep	4.3.1, 4.4.6, 4.4.7, 4.5.1			X				O	
Building A2 (Stock Prep Area)	SWPs, EOPs, RAs, Monitoring & Measurement, Emergency Prep	4.3.1, 4.4.6, 4.4.7, 4.5.1	X		X				O	
Building A3 (Core & Broke W/H)	SWPs, EOPs, RAs, Monitoring & Measurement, Emergency Prep	4.3.1, 4.4.6, 4.4.7, 4.5.1			X				O	
Building H (All Office Areas, Welfare Areas)	SWPs, EOPs, RAs, Monitoring & Measurement, Emergency Prep	4.3.1, 4.4.6, 4.4.7, 4.5.1						O	O	
Building G (Gatehouse)	SWPs, EOPs, RAs, Monitoring & Measurement, Emergency Prep	4.3.1, 4.4.6, 4.4.7, 4.5.1				X			O	



Audit Planning Matrix

Attenuation Ponds / Oil Interceptors	SWPs, EOPs, RAs, Monitoring & Measurement, Emergency Prep	4.4.6, 4.4.7, 4.5.1	X			X		O	
External Grounds & Perimeter Buildings	SWPs, EOPs, RAs, Monitoring & Measurement, Emergency Prep	4.4.6, 4.4.7, 4.5.1	X	X	X	X	O	O	
Waste Management (WEEE, Hazardous / Non-Hazardous)	SWPs, RAs, EOPs, Monitoring & Measurement, Emergency Prep – Spill Control	4.4.6, 4.4.7, 4.5.1	X	X	X	X	O	O	
Fire Related System Controls (alarms, e/lights, extinguishers etc.)	Monitoring & Measurement, Emergency Prep	4.4.6, 4.4.7, 4.5.1, 4.5.4	X		X	X		O	
Sprinkler System Controls	Monitoring & Measurement, Emergency Prep	4.4.6, 4.4.7, 4.5.1, 4.5.4	X			X		O	
Steam Boiler / RO Water Controls	SWPs, EOPs, RAs, Monitoring & Measurement, Emergency Prep	4.4.6, 4.4.7, 4.5.1, 4.5.4	X		X		O	O	
Cooling Tower, Domestic Supply Control	EOPs, Monitoring & Measurement, Emergency Prep	4.4.6, 4.4.7, 4.5.1, 4.5.3, 4.5.4	X	X	X		O	O	
Refrigerant Management, Air-Con & Chillers	EOPs, Monitoring & Measurement, Emergency Prep	4.4.6, 4.4.7, 4.5.1, 4.5.3, 4.5.4	X			X	O	O	
Control of Contractors & Visitors	SWPs, RAs, Inductions, Permits	4.3.1, 4.4.2, 4.4.3, 4.4.6, 4.5.4	X			X	O	O	
Effluent Treatment Plant & Stack Emissions (Part B Permit - EPR/BU2489IT/V007) (9 th Jan-12)	EOPs, Monitoring & Measurement, Emergency Prep	4.4.6, 4.4.7, 4.5.1, 4.5.4	X	X	X		O	O	
Greenhouse Gas Permit (GB-EA-ETCO2-1197 CP10)	EOPs, Monitoring & Measurement, Emergency Prep	4.4.6, 4.4.7, 4.5.1, 4.5.4	X	X	X		O	O	
Packaging Waste Obligations (Waste-pack)	Monitoring & Measurement	4.4.6, 4.5.1, 4.5.4	X	X	X	X	O	O	



Audit Planning Matrix

Chemical Receipt, Storage	SWPs, RAs, COSHH, Handling & Storage of hazardous chemicals	4.4.6, 4.4.7, 4.5.4			X			O	O	
Fuel Storage (LPG / Diesel)	EOPs, Emergency Prep – Spill Control	4.4.6, 4.4.7, 4.5.1	X					O	O	
Radiation Permit (EA/02/CA5290)	HPA Visits etc.	4.4.4, 4.4.7, 4.5.1	X	X					O	

General Notes:	
-----------------------	--

In column 1, list the departments, processes, activities or other functional units, as defined by the organisation. These should be the same departments and/or processes identified on the audit plan.

In column 2, list the primary or critical aspects, objectives and/or KPIs applicable to the department, process or activity.

In column 3, list all the elements of the applicable standard that relate to each activity or process defined in column 1 (when complete, each element of the standard must be listed in column 2 at least once).

For planned visits, indicate with an "O" in the box for each process to be covered.

For each completed visit, mark "X" in the box for each department or process covered. If nonconformities are identified, note the number of minors and/or majors identified in each department or process.

For integrated contracts please record level of the integration of the client's IMS in the 'General notes' section.



Contract Data Information Return Form

Name:	David Jenkins	Date	2 May 2014
Additional Team Members:			
I confirm that the audit team have completed the relevant Technical Area Qualification Form(s) for the Technical Area Code(s) listed on the page 2 of this report.		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

Certificate Details:

Please note the details given below will appear on the certificate issued to the client.
 I have confirmed the below with client and any changes have been made to this data.
 NB. This section will be blank if this is for an Initial visit.

Certificate Number	Standard	Accreditation Body	Full Site Address
GB09/79278	ISO 14001:2004	UKAS	Brunel Way, Baglan Energy Park, Neath, Wales, SA11 2HZ, GB
GB09/79279	BS 18001:2007	UKAS	Brunel Way, Baglan Energy Park, Neath, Wales, SA11 2HZ, GB

	Yes	No
Has the level of integration changed since the last audit?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Has the scope changed since the last audit?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
I confirm that I have verified the EAC/NACE/TAC shown on page 2 of this report to be correct and accurately reflect the client's scope of certification.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
It was necessary for me to change the EAC/NACE/TAC on page 2 of this report	<input type="checkbox"/>	<input checked="" type="checkbox"/>
It was necessary for me to change the number of employees on page 2 of this report	<input type="checkbox"/>	<input checked="" type="checkbox"/>
It was necessary for me to change the company name on Page 2 of this report	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Administration Details:

- Please complete

Client email address confirmed as	Jeff.hall@intertissue.co.uk Kerry.mackinnon@intertissue.co.uk
-----------------------------------	--

Provisional date for next visit (To be filled in by SGS Employees only)	5 th – 7 th Nov-14	
FUA Required? (If yes, give units and date)	Yes <input type="checkbox"/> Date:	No <input checked="" type="checkbox"/>
Additional comments		

No of Duplicate Certificates		No of Van Stickers (Colour on White)		No of Van Stickers (Colour on Clear)	
------------------------------	--	--------------------------------------	--	--------------------------------------	--

Client Details:

- Only record contact detail changes below, otherwise leave blank



Telephone No	
Fax No	
Contact Name	
Position	
Website	
Invoicing Address	



Expenses Form

Auditor Name: David Jenkins	Date 02/05/2014
------------------------------------	------------------------

I confirm the invoicing address has been confirmed with the client

Miles at current rate	274	£
Air		£
Rail		£
Taxi		£
Hotel & Subsistence		£
Parking		£
Car		£
Toll		£
Incidental Expenses		£
EXPENSES TOTAL		£

Purchase order number (If applicable)	
Days to invoice client (Minimum of 2 hours for Major CAR close out)	2.5 days

For completion by Contractors:

Number of days for payment	
LTD Co. ONLY – Your SGS Purchase Order Number for this visit	



The electronic report format is compiled using the following documents:

Document	Issue	Description
GS0304	15	Stage 2 Report
GS0307	5	Audit Plan
GS0305	5	Audit Planning Matrix
GS0301	9	Certification History Review
UK CRF 30	4	UK Contract Data Information Return Form
UK CRF 29	7	Expenses Form

NB. Please do not delete this page