



Audit Report for Kellogg Company of Great Britain Ltd (Europe)

Visit Number 4 Surveillance Audit

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Management System Certification Audit Summary Report

Organisation:	Kellogg Company of Great Britain Ltd (Europe)		
Address:	Wrexham Industrial Estate Wrexham Clwyd LL13 9UT		
Standard(s):	ISO 14001:2004 - Environmental Management System Certification	Accreditation Body(s)	UKAS
Representative:	Nia Jones		
Site(s) audited:	Wrexham	Date(s) of audit(s):	21-10-2015
EAC Code:	03	Nace Code:	15.61
		Technical Area Code:	EM5
Effective No. of Personnel	405	No. of Shifts:	4
Lead auditor:	Lynn Jones	Additional team member(s):	Emma Owen
Additional Attendees and Roles	N/A		
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 - Manufacture of ready to eat cereals and baked bars.
Environmental Management
System Certification

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 has 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:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> None raised
<i>Evidence:</i>			
<ol style="list-style-type: none"> 1) Duty of Care Review and ensure that waste contractors provide quarterly returns for hazardous waste. All now received quarterly 2) Review and clarify the categorisation of environmental incidents in the corrective and preventive action procedure EMS 0015 EMP and the FGas procedure leak of the Air con 407 c 9.5kg .gas procedure amended and communication with 3rd party contractor 3) Review and clarify the process for follow up of the air conditioning and other service records to ensure that all issues identified have been resolved and logged appropriately. Contractor produces and action list following the service visits and this is then. 4) Review and clarify the training status for Air conditioning contractor Elliot Wainwright and ensure that job sheets have been correctly completed to reflect this status. Records received. Brooktherm 21/5/15 NVQ Elliot Wainwright, C & G 25/1/12, Nikolas Davies June 2005 . 5) Review with neighbour Portable Foods possible pest control issues with wheeled bins being left open and a gas cylinder left behind by their contractor. Portable Foods have taken action re possible pest control issues, Chiller gas has been moved to secure storage. 6) Review the position of the empty Effluent Skip s ready for use stored near to the trailer yard in order to prevent them being contaminated with non recyclable wastes by visiting drivers. Lids mended 7) Review the Bran area canteen facility and remind staff re waste segregation. Communications sent. 8) Review the Welding gas stored in the independently locked workshop near to the forklift charging area, to ensure that there is access in the event of an emergency. Locks changes now have access in an emergency. 9) Review the storage of plastics on top of FKLFT charging units to ensure that this is stopped. Removed 10) Review and clarify which chemicals are required to be stored in the flammable chemicals cabinets adjacent to the main workshop area. Dispose of any unwanted chemicals by the appropriate route. Ensure that MSDS with environmental sections are available for all chemicals that are to remain following the review. Reviewed and corrected. 			

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

Changes:

Level of Integration?	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Basic	<input type="checkbox"/> High
Key/Significant Organisational changes? (e.g key personnel, client activities,	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	

management system) Site budgets have been further reduced and the site is in the process of further consultation with employees. Demand for the products produced on site has reduced key lines are Special K , Bran and Wheat Flakes and Elevesens bars.. The equipment that is no longer required on site is being removed. New belts and conveyors are currently being installed for these lines		
Key/Significant System changes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<i>Sample reviewed:</i> No major system changes since the last visit		

Management Review:

Undertaken at defined intervals?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Date of last review:</i>	9/10/15	
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>		
Quarterly management reviews held. Last meeting undertaken October 2015, discussions included: actions, policy, targets, aspects, complaints, legal, audits, incidents, complaints, performance and projects.		

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>		
Schedule for 2015/16 seen. Audits sampled:		
12-28.05.15 – NJ – air emissions, no NCs		
26.06.15 – TS – ODS/F-Gas, 2 NCs		
NCs from above on log, 256/257, procedure update, closed.		
Internal Audit Schedule 2014 Plant air emissions		
Sept 15 Legal Compliance Review		
Training and Communication audit by Mark Hart completed 22/4/15 - evidence recording of training records reviewed to be expanded/documentated.		
See Section 8		

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>		
2 noise complaints received – issue snow rectified re alarm for roller shutter door.		
External		

Primarily handled through NJ e.g. Carbon Trust, North Wales Wildlife Trust. Local project in planning for wild flowers/ local school. Continued communication with regulators - Natural Resource Wales, Welsh Water.

Internal communications

EHS information board contained good level of information. Quarterly business briefings include environment where applicable - seen for Q1, energy related topics. Signed attendance sheets held.

Suggestion scheme started – 35 suggestions to date which have largely been accepted. Good projects resulting – such as office turnoff, LEV, equipment checks, sensors etc.

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 checked="" 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

Sample reviewed:

Waste

Waste 20% reduction waste to landfill by 2015 baseline 2009 – completed (global)
 Reduce secondary sorting of general waste by 5% compared to 2014 - 2014 115 tonnes, YTD 89 – on track

Energy

20% reduction energy per tonne of product by 2015, baseline 2005
 2014 1768 kwh/t
 YTD 1780 kwh/t against 1680 targets. Difficult target, but significant improvements made

Water

20% reduction in water use per tonne produced by 2015 (baseline 2005)
 2014 - 4.63 m3 / tonne of product
 2015 – YTD 3.18 (target 4.4)

A good amount of data and graphics/ analysis seen for above. EHS Information Board seen to include data on all, along with summary sheets. Key projects include:

- Carbon Trust
- Bills review
- Air compressors
- Energy audits
- Area responsibility
- River discharges
- Focus on recycling/ awareness

EHS monthly shift meetings held, seen to include above. Seen for Oct 2015.

The Environmental Programme master Schedule 2016 V2 was reviewed with Chris for current projects
 Bran Flakes line – energy optimisation - parked project due to product quality issues on this line.
 Energy Awareness for staff – Energy saving presentations and energy suggestions scheme.

Energy Audits around the plant including: compressed air leak assessment – waiting for line shut downs in order to enable detection.

Steam meters to be fitted to the 4th process – the system is connected to portable foods – therefore isolation valves have been fitted in order to be able to work on the system without affecting portable foods.

Steam meters – project parked at present.

High efficiency lighting project – LED lighting replacements cost 100K – currently 90% completed – aiming for 100% by Feb 16.

Boiler house – 60k capital; project – compressed air efficiency - installation of inverters to gain maximum efficiency from the two compressors.

Grey water re use – working with H2 UK on a feasibility study – eventual aim gain a discharge consent variation to be able to discharge directly into field drainage to watercourse. ETP discharge improvements project.

balance tank circulation pump reviewed – ESOS audits – aeration and oxygenation improvement.

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:</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:

Sample reviewed: Legal register seen, WX-EMS-0012-EREF, rev 18, October 2015. Sampled:

Compliance evaluation

Annual audit undertaken by L Percival, Sept/Oct 2015. Covered permit, CCA/ESOS/EUETS, EPB, discharge consents, waste, hazardous waste, oil storage. Findings – 8 recommendations raised as part of the above – seen on environmental corrective action register.

Permit

Environmental permit BV 8016 ID / V006, 9/11/05, administration variation on 21/3/13 – no change.

No recent regulator visit since last audit

No recent notifications

Quarterly return emails seen for April, July and October 2015, no returns from regulator

Discharge consents

River Dee - DPZ 0041 held, no changes.

Trade Effluent - E590 Direction 2held, no changes.

Monitoring data seen for the above 2 consents:

ETP – no exceedances noted, data reviewed from July

Balancing ponds/ river – data seen July to date, one exceedances noted 16.06.16 COD 86. Tracked on action log.

Individual log sheets seen for test results, WX-EMS-0002-EMR

Hazardous Waste

Site Hazardous Waste Registration held CAA549, expires 15.07.16.

Waste notes sampled in section below.

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:

Sample reviewed:

KPI database seen, detailing number of incidents/ complaints. Since last SGS visit, 10 issues recorded

320, 20.05.15, vehicle washing, closed

321, 06.06.15, oil spill, closed

322, 13.06.15, oil leak, closed

325, 22.07.15, product spill, closed

328, 15.09.15, paint spill, closed

The majority related to small scale leaks and no damage occurred.

Consent exceedance seen on incident record - # 324, closed

Complaints

One noise complaint received since last SGS audit:

319, 15.05.15, noise issue, closed. NJ explained situation, corrective and preventive actions

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: As above – suggested measures to avoid recurrence section used as necessary.

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 WX-EMS_0011-EREF Revision 15 October 2015
 Including plant emissions, , Boiler stack emissions, Energy usage , Surface Water Discharges , Discharge to Foul Sewer, Water use, General Waste Dry/ Solid, Hazardous Waste and Aerosols, Electrical and Electronic Waste, Medical Waste Sharps, Noise, Energy use, Ozone depleting substances, and F Gases, Cooling Towers, Wet scrubbers, Eyewash Hot and Cold water, pesticide usage, Asbestos
 Site appearance impact, emergency conditions, pesticide use and pest control , welding flame cutting and allied processes.
 Review re asbestos re inspection and identification only as plan still relevant

See Section 8

Operational Audit Trails:

Additional requirements identified from the audit plan:

Additional requirements identified from the audit plan:

Environmental Policy

WX-EMS-0001-EP, rev 13, March 2015seen. Signed by key site management and available around the site.

Waste Management

Records sampled:

Waste transfer note summary table, rev 38

Plastic – Recycling UK Ltd, annual note to 31.01.16, 20 01 39, CB/PM3251DM, 27.06.16

Cooking oil – Filtafry Plus, annual note to 31.016, 20 01 25, SIC 10.61, CB/WN5571MK, expires 19.10.18 (not confirmed yet by NRW)

Effluent sludge – Trade Effluent Services Ltd, NEZ168 (correct at time), 13.05.15, 13 05 08, SIC 15.61/2, CB/WE593KN, expires 18.06.18, signed Part E held, quarterly return obtained.

Mixed haz – Hazport, 15.10.15, CAA549, 08 01 11, SIC 15.61, CB/RM3386UN, expires 11.04.17, signed Part E, quarterly return held for previous notes.

Site Tour/ operational controls

A tour of the facility was undertaken including ETP, waste areas, fuel tanks, raw material silos, spill material provision, ponds, drainage, contractors compound. Records/ evidence seen:

Good waste segregation – WEEE, metal, plastics, general, paper, tubes, oily rags etc

Drains colour coded (different to norm, red = surface water)

WX-EMS-0004-EMP – oil unloading

WX-EMS-0006-EMP – raw material spillage

Tank integrity checks – seen monthly for April to Oct, e.g. 24.08.15

Calibration

Records checked for items in lab for discharge tests:

Hach TM 355, due 18.02.16
Hach photo spectrometer, due 18.02.16
pH meter, TM 142, Trescal, 16.12.15 – showing adjustments

Roof Monitoring records – 2015 YTD reviewed - completed daily

Aspects of purchased products

Contractor Control

Mitie painting works - Painting risk assessment last reviewed 28/4/15
COSHH Assessment painting issue 1 - 11/10/13 mentions paint and ultraclean detergent.
Armstead - High Gloss paint- and Undercoat.

See Section 8

Emergency Preparedness and response-

Wrexham site emergency plan including fire sprinkler system , foul drainage, surface water drainage including interceptors and dust extraction system.

Spill kits located around the site all fully stocked.

Fire extinguishers all those sampled had been serviced and next due 2016.

labels would benefit from review as damp and deteriorating in some steamy area soft eh plant.

Crisis management procedure Rev 7.0 Oct 14 .

site location , incident plans, emergency contact numbers,

Drills controlled from Dublin- unplanned visits take place to test site arrangements.

Site tour Internally and externally

Reviewed production areas including spill kits , energy use and mothballing of machinery and areas – RDX plant not in use, site housekeeping, waste segregation. Internal vehicle charging areas , storage of chemicals.

Divosan QC VT50, Rocol food lube – staff awareness of location of MSDS and disposal instructions on

Sharepoint reviewed with Ian Pearce and team. Most recent COSHH assessment for the Food lube 3/14.

Tank Floor Spill kit 16 reviewed waste segregation in Breakout area to be reviewed mixed wastes noted.

Mitie carrying out floor painting in the area where equipment has been removed.

Reviewed data sheets Torship water based paint stripper ref S54300005 COSHH assessment due review 2017

product testing waste segregation – well controlled.

Packing hall breakout area waste segregation to be reviewed.

Maintenance areas reviewed. – forklift workshop – Flammable storage reviewed

Forklift charging area- some chargers left on when not in use.

See Section 8

Energy Management

Reviewed projects as per Programme section above.

Air conditioning systems management

Reviewed Brooktherm records including:
 2015 service records replacement of R22 with M059 gas
 Sampled 2-/5/15 Leak of 38 kg of R22 replaced with R417A
 5/6/15 Asset 04141 R22 removed 98.36 kg
 23/9/15 Line 6 Removed 9kg of R407c - decommissioned.

Reviewed log sheet layout to add a leak column and to EMS 0026.

There are currently 21 units on site containing R22 gas - none in production critical areas.
 No plan to replace units as non critical areas.

Legionella and cooling tower controls

Cooling Tower maintenance records reviewed- Alchem
 Legionella testing weeks 40, 35 and 31 further treatment required.
 Rectified on each occasion
 last report 19/10/15
 12/10/15 Scrubber dip slide results reviewed.
 New jar dosing system reviewed no waste and no risks – much improved system
 Jars are collected and recycled.
 Cooling tower Chemical treatment WCS B100.

Waste management

Contractors skips 20/10/15 Nick Brookes Recycling 3/1/15 CB/DM3382BY Kellogg’s weighbridge Ticket - Rubble and Brick Waste . WML – EAWML 50066/M01 2/2/15

Environmental Management records- checklist for capital projects revision 4 June 2013

Risk Assessment for AC Concepts Ltd carrying out canteen refurbishment works reviewed.
 Waste segregation in 3 production break out areas would benefit from review.

Contractor Control and Environmental Awareness

Reviewed for canteen refurbishment ongoing at present – activities include: Plastic bending and lamination, cladding using adhesives.
 Wastes produced wood and metal and adhesive tins.
 1 Skip removed from site – note reviewed.

Contractor site inductions sampled at reception for AC Concepts/ 3D design Mark Edwards, Mark Stott and Paul Scott.

Contractor Training

Electronic records seen for:

- D Wright, Bowmac, 24.03.14
- M Easton, Dimension Data, 09.04.14
- G Maher, Redhall Jex, 07.04.14
- C Elwood, A & D, 11.09.14

Each last for 3 years.

Drivers – awareness through company only.

Use of Certification claims and marks

No issues identified on site or on the web site.

7. Nonconformities Nil

NonConformity N° ____ of ____

Department /

Function:

Document Ref.:

Major Minor

Standard

Ref.:

Issue / Rev.

Status:

Details of

Nonconformity:

- Relating to Client Proposed Action to Address Minor Non-Conformances Raised at this Audit:

Nonconformities detailed here shall be addressed through the organisation’s corrective action process, in accordance with the relevant corrective action requirements of the audit standard, including actions to analyse the cause of the nonconformity and prevent recurrence, and complete records maintained.

- Corrective actions to address identified major nonconformities including a cause analysis shall be carried out immediately and SGS notified of the actions taken within 30 days. An SGS auditor will perform a **follow up** visit within 90 days to confirm the actions taken, evaluate their effectiveness, and determine whether certification can be granted or continued.
- Corrective actions to address identified major nonconformities including a cause analysis shall be carried out immediately and **records with supporting evidence sent to the SGS auditor** for close-out within 90 days.
- Corrective Actions to address identified minor non conformities including a cause analysis shall be documented on an action plan and sent by the client to the auditor within 90 days for review. If the actions are deemed to be satisfactory they will be followed up at the next scheduled visit.
- Corrective Actions to address identified minor non-conformities including a cause analysis have been detailed on an action plan and the intended action reviewed by the Auditor, deemed to be satisfactory and will be followed up at the next scheduled visit.
- Appropriate cause analysis and immediate corrective and preventative action taken in response to each non-conformance as required.

Note:- Initial, Re-certification and Extension audits – recommendation for certification cannot be made unless check box 4 is completed. For re-certification audits the time scales indicated may need to be reduced in order to ensure re-certification prior to expiry of current certification.

Note: At the next scheduled audit visit, the SGS audit team will follow up on *all* identified nonconformities to confirm the effectiveness of the corrective actions taken.

8. General Observations & Opportunities for Improvement

- 1) Review and clarify on the Aspects Register entry for asbestos- that the control measures are the plan , identification of areas and checks for damage- rather than removal from site.
- 2) Review and clarify in the forklift workshop the storage of flammable substances the metal cupboard needs a sign , the door being kept closed and removal of books files and paper rolls.
- 3) Review and arrange refresher training on how to access the MSDS and COSHH assessments on Sharepoint.
- 4) Review and clarify with all production vehicle operators that charging units should be switched off when not in use.
- 5) Review waste segregation in the break out areas to ensure that all staff are aware of the need to use the correct bins.
- 6) Review with the fire extinguisher contractor the type of labels used.
- 7) Review and clarify the columns on the Refrigerant Usage Form – 38 Kg R22 - include the reason for usage. EMS 0026 EMR and ensure the leak of 20/5/15 is captured in the annual summary.
- 8) Environmental permit for canteen refurbishment works to be reviewed to ensure that emissions to atmosphere from the plastic forming are included and energy consumption reduction of the new kitchen equipment has been assessed and recorded as these are environmental impacts.
- 9) Review and clarify that the transfer note with LE Jones is set up rather than with Recycling UK.
- 10) It is suggested that EWC codes and waste destination are added to waste summary table.

- 11) Check SIC codes on transfer notes (e.g. one missing, one hazardous instead of non hazardous)
- 12) Suggest an emergency spill test is undertaken which is not part of a training event.
- 13) Review and clarify the need for additional pH checks – as last calibration noted adjustments made. Maybe re-introduce site buffer checks
- 14) Where calibration checks indicate adjustments made, it is suggested this is added to action log and action taken to address.
- 15) Review and clarify that all evidence reviewed during internal audits is being attached to the reports going forward.
- 16) Review and clarify with Auditors that they should aim to complete audits in shorter timescales (e.g. ODS audit commenced June, NC dated August).

As a result of this visit 16 Opportunities for Improvement have been identified

The system is well managed and all documentation is well organised.
 The housekeeping on the site is well managed both internally and externally.
 With thanks to Nia, Darran and the team for their hospitality and positive approach to the surveillance audit process.

Lynn Jones and Emma Owen,

9. Opening and Closing Meeting Attendance Record

Name	Position	Opening	Closing
Karen Thomas	Plant Director	Yes	Yes
Mark Hart	Services Engineer		Yes
James Handley	Operations Manager	Yes	
Nia Jones	Environment Coordinator	Yes	Yes
Wynn Evans	Security	Yes	Yes
Mike Edge	Operations Services Manager	Yes	Yes
Darran Edwards	OHSE Manager	Yes	Yes
Chris Hughes	Capital and Development Manager	Yes	Yes
Melanie Forster	Operational Development	Yes	Yes
Tina Shrubbs	EHS Associate	Yes	Yes

Jim Salzy	Unit Lead	Yes	
Abby Ison	KWS Manager	Yes	
Julian Price	EHS Practitioner	Yes	Yes
Chris Jones	HR Relations Manager	Yes	
Clare Foster	Finance		Yes
Michelle Youens	QFS Manager		Yes

Audit Plan (Current Visit)

Organisation:	Kellogg Company of Great Britain Ltd (Europe)		
Address:	Wrexham Industrial Estate Wrexham Clwyd LL13 9UT		
Visit Number:	4	Agreed Visit Date(s):	21/10/15
Visit Due by Date:	25/10/2015	For auditor information only	
Lead Auditor:	L Jones		
Team Member(s):	Emma Owen		
Additional Attendees and Roles	N/A		
Standard(s):	ISO 14001:2004 - Environmental Management System Certification		
Audit Language:	English		
Audit Scope:	ISO 14001:2004 - Environmental Management System Certification	Manufacture of ready to eat cereals and baked bars.	

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
21/10/15	9.00	LJ/ EO	Opening Meeting/Review last audit findings and previous visit report/ Changes	See Section 9
	9.30	LJ/EO	Management Review / Policies / Roles and Responsibilities	Nia
		LJ EO LJ	Aspects Evaluation / Legal Requirements / Compliance evaluation Objectives / Targets / Programmes	Nia
	9.30	LJ	Emergency Preparedness and Response	Wynn Darran
	10.30	LJ	Site Tour Internal – To include waste and chemical management, Contractor Compound Aspects of purchased products	Wynn Darran, Ian Nia and Darran
	12.30	LJ/EO	Lunch	
	13.00	LJ.EO	Energy Management Wet scrubbers Bulk fuel management and buk deliveries ETP Cooling Towers Legionella Waste management	Chris, Mark, John Darran and Nia
	13.00	LJ.EO	Stakeholder Concerns / Environmental Incidents / Internal Audits / CAPA	Nia
	14.00	LJ/EO	Training and competence staff and contrcator awarenesss Use of Certification cliams and marks	Nia
	15.00		Auditor Summary time	
	16.00	LJ/EO	Closing meeting	See Section 9

- 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 Plan (Next Visit)

Organisation:	Kellogg Company of Great Britain Ltd (Europe)		
Address:	Wrexham Industrial Estate Wrexham Clwyd LL13 9UT		
Visit Number:	5	Agreed Visit Date(s):	20/4/16
Visit Due by Date:	25/4/2016	For auditor information only	
Lead Auditor:	L Jones		
Team Member(s):	TBA		
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Date	Time	Auditor	Area / Department / Process / Function	Key Contact
20/4/16	9.30	Auditor 1 and 2	Opening meeting	
	9.15	Auditor 1 and 2	Review of last visit findings and subsequent changes on site.	
	9.30	Auditor 1 and 2	Management Review process	
	10.00	Auditor 1	Objectives targets and management programmes Aspects and Impacts	
	10.00	Auditor 2	Legal Register and Legal Compliance Evaluation	
	10.30	Auditor 1 and 2	Stakeholder Concerns	
	11.00	Auditor 1 and 2	Environmental Incidents , Nonconformities Internal Audits	
	11.30	Auditor 1 and 2	Records Waste Management and weighbridge calibration Energy Management F Gas Management Consents	
	12.30		Lunch	
	13.00	Auditor 1 and 2	Site tour Waste	

Date	Time	Auditor	Area / Department / Process / Function	Key Contact
			Water and Effluent management Interceptor Management Emergency Preparedness and Response – Security Bulk Fuel , Waste Oil and Chemicals	
	14.00	Auditor 1 and 2	Contractor Control	
	14.30	Auditor 1 and 2	Staff Training and Competence	
	14.45	Auditor 1 and 2	Use of certification claims and marks	
	15.00	Auditor 1 and 2	Auditor Summary Time	
	16.30	Auditor 1 and 2	Closing meeting	
	16.45	Auditor 1 and 2	End of Audit	
			All times as per client request	

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:					
			V2 6/10/14 AS/LJ	V3 14/5/15 LJ/RE	V4 21/10/15 LJ/EO	V5 20 April 16 LJ/TBA	V6 Oct 16 TBC	V1R April 17 AS/LJ
Environmental Manual and supporting procedures	Manuals	4.1, to 4.6 inclusive	X	X	X	O	O	X
Policy	Policy	4.2.	x	X	X	O	O	X
Environmental Aspects	Aspects Register EMP 0019	4.3.1	x	X	X	O	O	X
Legal and Other Requirements	Legal Register EMP 0020	4.3.2	x	X	X	O	O	X
Objectives, Targets and Programmes	Objectives Register and Improvement Programme	4.3.3	x	X	X	O	O	X
Resources, Roles, Responsibility and Authority	Structure EMP 0023	4.4.1	x	X	X	O	O	X
Competence, Training and Awareness	Training Logs / Competencies EMP 0023	4.4.2	x	X	X	O	O	X
Env Communication	EMP 0021	4.4.3	x	X	X	O	O	X
Documentation	Procedures EMP 0003	4.4.4	x	X	X	O	O	X
Control of Documents	EMP 0003	4.4.5	x	X	X	O	O	X
Emergency Preparedness and Response	Incidents Register EMP 0018 EMP 0022	4.4.7	X Minor NCR	X	X	O	O	X
Bulk Material Spills	Procedures for containment of Bulk Spills (Vehicles and clean up) EMP 0002 EMP 0007	4.4.7	X	X		O		X
Monitoring and Measurement	Checklists / Records / Calibration EMP 0013	4.5.1	x	X	X	O	O	X 1 Minor
Evaluation of Compliance	EMP 0020 EMP 0016/17 EMP 0028	4.5.2	x	X	X	O	O	X



Audit Planning Matrix

Nonconformity, Corrective & preventive action	Register of Complaints / NCRs' EMP 0015	4.5.3	x	X	X	O	O	X
Control of Records		4.5.4	x	X	X	O	O	X
Internal Audit	EMP 0011	4.5.5	x	X	X	O	O	X
Management Review	Minutes of Meetings	4.6	x	X	X	O	O	X
Process Areas	Processes and Waste Streams EMP 0001 EMP 25/26	4.4.6		X Bran	X			X
Compressors		: :	x	X		O		X
Boilers		: :		X			O	
Effluent Treatment	EMP 0012	: :	x	X	X			X
IPPC (S P & M Plan)	EMP 0016/17	: :	x	X	X	O	O	
Wet Scrubbers		: :			X			
Cooling Towers		: :	x		X	O	O	
Bulk Fuel, Waste Oil & CIP Chemical Bund Emptying procedure	EMP 0004, EMP0005	: :	x				O	
Bulk material receipt Drum Material Handling	EMP 0008 EMP 0006 EMP 0010	: :	x	X			O	X
Waste Contractors	EMP 0014	4.4.6, 4.5.2		X	X			X
General Notes:								

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.



CERTIFICATION HISTORY REVIEW Not Applicable at this visit

Client Name: Kellogg Company of Great Britain Ltd (Europe)	Contract#: GB/NN 207497
Location(s):	

Section A: To Be Completed At Pre-Renewal Visit

The Pre-Renewal visit shall include an in-depth review of the client's certification history to identify whether there are any special considerations which need to be taken into account for the Renewal visit. The review should include any changes to the organization and system, prior audit reports and nonconformities over the certification cycle, complaints or serious incidents and any other pertinent information. This form may be used to note or comment on significant factors relating to the execution of subsequent visits (eg: this client is a satellite operation of a multi-site organization; Management Review, Internal Audits, Corrective and Preventive Action controlled from a different site; seasonal work, large degree of automation, etc.).

Management System:

The organization has made significant changes to its management system or small refinements?

- Small Refinements Significant Changes

Upper Management are actively involved in the operation of the Quality System

- Management Active Management not active

Internal Audit Program:

Internal Responses to Corrective Actions raised result in System Improvement

- System Improvement seen 'Symptoms' fixed only

Internal Audits in Year Three identify improvements as opposed to showing system compliance only

- Results used to improve system Audits concentrate on compliance only

Corrective and Preventive Action Program

Response to Corrective Actions raised concentrates on Root Cause rather than superficial fixes

- Root Causes Identified 'Symptoms' fixed only

No history or evidence that issues identified through corrective action reappear

- Action prevents recurrence Items reappear

Evaluate possible future changes to the organization

Change in Scope adding Design or diversification of existing products or services

- No scope change likely Change in scope projected

Addition of Sites, number of employees or shifts

- No change to sites / employees / shifts Sites / employees / shifts will change

Consideration of Automotive / Aerospace / Technology variants (QS/TE/AS)

- No technology variants likely Technology variants likely

Registration History

The number of corrective actions raised by SGS over the registration period decreases

- SGS Corrective Actions decrease SGS Corrective Actions constant or increase

Do major corrective actions (if any) appear in Year One only?

- No Majors, or in Y1 only Major Corrective Actions in Y2 and/or Y3

Other additional notes or comments relating to the planning and execution of the Renewal visit:

Renewal planning review completed by (*Name*):

Date:

Contract Data Information Return Form

Certificate Details:

Name:	Lynn Jones	Date	21/10/2015 5:00:00 PM
Additional Team Members:	Emma Owen		
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"/>

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 and should be completed by the auditor in full (with the exception of the Certificate Number).

Certificate Number	Standard	Accreditation Body	Full Site Address
GB02/55294	ISO 14001:2004	UKAS	Wrexham Industrial Estate, Wrexham, Clwyd, LL13 9UT, 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:

- **This Must be Confirmed**

Client email address confirmed as	Nia.Jones@kellogg.com
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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)	
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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:	Lynn Jones	Date	21/10/15
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I confirm the invoicing address has been confirmed with the client



Miles at current rate	LJ 82 EO 150	£127.60
Air		£
Rail		£
Taxi		£
Hotel & Subsistence		£
Parking		£
Car		£
Toll		£
Incidental Expenses		£
EXPENSES TOTAL		£127.60

Purchase order number (If applicable)	Nia Jones
Days to invoice client (Minimum of 2 hours for Major CAR close out)	2.00

For completion by Contractors:

Number of days for payment	1.00
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	18	Stage 2 Report
GS0307	5	Audit Plan
GS0305	5	Audit Planning Matrix
GS0301	9	Certification History Review
UK CRF 30	5	UK Contract Data Information Return Form
UK CRF 29	7	Expenses Form

NB. Please do not delete this page