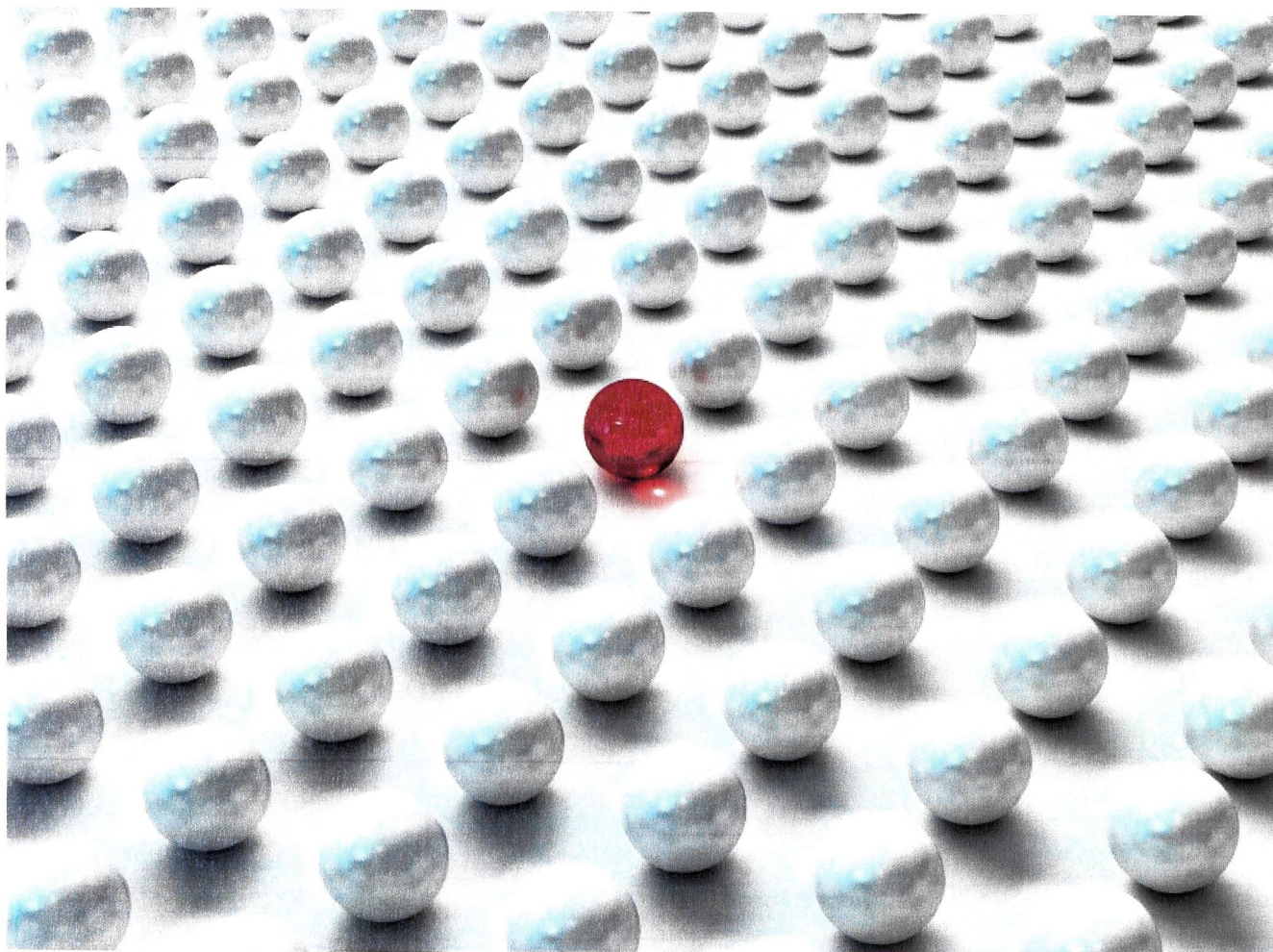




Audit Report for: Kellogg Company of Great Britain Ltd (Europe)
Visit Number: 2 Surveillance Audit

**For training on this management system and for all your training needs,
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Management System Certification – Client Report

Organisation:	Kellogg Company of Great Britain Ltd (Europe)		
Address:	Wrexham Industrial Estate Wrexham Clwyd LL13 9UT		
Site(s) audited:	As above	Date(s) of audits(s):	27/09/2017-27/09/2017 17:00:00
Visit Number:	2	Observer(s):	N/A
Representative:	Nia Jones	Additional member(s):	Emma Owen
Lead auditor:	Ken Whitelaw		

This report is confidential and distribution is limited to the audit team, client representative and the SGS office.

System type:	Single		
Standard	Accreditation Body	Scope of Certification	
ISO 14001:2004	UKAS	Manufacture of ready to eat cereals and baked bars.	

The objectives of this audit were to determine conformity of the management system, or parts of it with audit criteria and its:

- ability to ensure applicable statutory, regulatory and contractual requirements are met,
- effectiveness to ensure the client can reasonably expect to achieve specified objectives, and
- ability to identify as applicable areas for potential improvement.

Is the organisation management system meeting the stated objectives of the audit?	Yes
Have all unresolved findings from the previous audit been satisfactorily addressed?	Yes
Non-conformance Identified?	Major: 0 Minor: 1
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:	Continued

Changes	
Level of Integration?	N/A
Key/Significant Organisational changes? (e.g key personnel, client activities, management system)	No
Key/Significant System changes?	No

Sample reviewed
No significant changes since the previous SGS visit. New product line will be in production by next SGS visit.

Executive Summary
The organisation has continued to maintain the controls necessary to demonstrate that the environmental management system is in compliance with the requirements of ISO:14001:2004 for the scope stated by the current registration. Such controls were seen to suitable, sufficient, appropriate and minimising risks to the business. Therefore based upon the sample of staff interviewed , direct observation of activities and review of records and documentation during this audit, the decision has been made to make a positive recommendation for continuation of the registration to the standard stated. No adverse trends were noted during the audit in relation to monitoring and measurement of corrective actions, non conformities, neighbours complaints, regulatory body intervention, accidents and incidents. All staff interviewed were enthusiastic and showed commitment to wanting to maintain legal compliance.

Observations and Improvement Opportunities
Noted 1 set of steps leading up to one the effluent tanks was temporary (scaffolding) – beneficial to construct a fixed set of steps. Fire incident 10.7.2017 – beneficial to keep records of how incident was handled – learnings can be determined for future incidents. Whilst MR content is good, it may be beneficial to ensure set agenda is fully in line with 14001 requirements e.g. status of CAPA / communications / compliance.

It may be beneficial to produce more in depth minutes/ bullet points for MR to capture discussions held..

Whilst the new construction on work has been subject to Environmental Permit discussions and planning, it would have been beneficial to review the aspects register prior to work as a 'planned' activity.

Whilst legal compliance audits are thorough they may benefit from confirming in detail more specific evidence seen.

Opening & Closing Meeting Attendees

Name	Position	Opening Meeting	Closing Meeting
Nia Jones	EHS Practitioner - environmental	y	y
Paul Thomas	MITIE – contracts manager	y	y
Tina Shrubbs	EHS Associate	y	y
Julian Price	EHS Engineer	y	y
Melanie Forster	Production Manager	y	y
Darren Edwards	EMS Manager	y	y
Michelle Youens	Quality Food Safety Manager	y	y
Chris Hughes	technical manager	y	y
Mike Edge	Technical operations manager	y	y

Any other comments

Kelloggs is planning to transition to ISO 14001:2015 at the next scheduled SGS surveillance visit.

Notes to the client and what happens next

This audit report will be processed and an invoice will be dispatched to you.

Disclaimer – the audit is based on a sampling process of the available information. Audit recommendations where issuance of a certificate is required are subject to an independent review prior to a final decision concerning the awarding of the certificate.

Non-conformance - what you must do

Corrective Actions to address identified minor non conformities including a root cause analysis, which shall be documented on an action plan. Where actions are deemed to be satisfactory , they will be followed up at the next scheduled visit.

Failure to address a major non-conformance within the timescales will result in certification being withheld or suspended.

Failure to address a minor non-conformance within the timescale can result in escalation of the non-conformance to major at the subsequent visit.

For major non-conformance -

Corrective action (including a cause analysis) to take place immediately. SGS will perform an appropriate follow up visit within 90 days confirming that actions have been effective. The certification decision shall be made based on the outcome of the follow up visit.

The client must notify SGS of the root cause & proposed actions within 30 days of this visit	☐
The client must send SGS records with supporting evidence	☐
Major non-conformance follow-up to take place on:	

For minor non-conformance -

Corrective Actions to address identified minor non-conformities including a cause analysis shall be documented on an action plan. Where actions are deemed to be satisfactory, they will be followed up at the next scheduled visit.

The client shall send SGS its action plan within 90 days to determine if the proposed actions will be satisfactory.	☐
The client has reviewed the non-conformance to the satisfaction of the auditor and defined an appropriate action plan. Note:- Initial, Re-certification and Extension audits – recommendation for certification cannot be made unless this check box 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.	☒
The client has taken appropriate immediate action in response to non-conformance(s) required.	☐

Nonconformity	N° 1 _ of 1 _	Minor	
Standard	ISO 14001:2014	Clause	4.4.2
Nonconformity Statement	The standard requires that persons working on the organisation's behalf receive appropriate training/ awareness. There is a system in place for contractor induction, however during the audit not all records could be located. As such the procedure is not being effectively implemented.		
Evidence	No induction record for S Horrocks, 13 th July 2017.		
Actions Proposed	Investigated at time of audit. Discovered to be director of an potential contractor brought onto site for a meeting only. However he was not signed on site as a visitor. Controlled through current principal contactor Lorient Plc. Review the current procedures.		

Nonconformity	N° _ of _	Major or Minor (<i>amend as necessary</i>)	
Standard		Clause	
Nonconformity Statement			
Evidence			
Actions Proposed			

Nonconformity	N° _ of _	Major or Minor (<i>amend as necessary</i>)	
Standard		Clause	
Nonconformity Statement			
Evidence			
Actions Proposed			

Audit Plan – Next Visit

Site(s) to be visited:	Wrexham site – as above		
Audit Language:	English	Visit Number:	V3
Visit Due by Date:	25/04/2018	Provisional Planned Visit Date(s):	TBA
Lead Auditor:	TBA	Team Member(s):	TBA

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	Site / Area / Department / Process / Function	Contact
TBA			Transition to ISO 14001:2015	
TBC	08.45	TBA (A & B)	Arrive at site	NJ
	09.00	"	Opening meeting – Changes to the organisation? And review of previous SGS visit	
		"	Management Review;	
	10.00	A	Aspects Evaluation Process	
		A	Objectives and targets	
		A	Legal and Other Requirements, compliance evaluations, permits and consents	
	10.00	B	Site walkover - Operational Controls - internal /external.	
		B	Emergency preparation	
	12.30		Lunch	
	13.00	A	Training, awareness and Competence	
	14.00	A	Communications external/internal/incidents/complaints	
	13.00	B	Internal Audits/ corrective actions	
	14.00	B	Commence report	
	15:00	A & B	Report finalisation and preparation for closing meeting	
	16:00	A & B	Closing meeting	

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.



UK.CEP Issue 2

1 - See page 2 for the management system scope of certification