OMA Report – Emissions to Air – EPR

Summary sheet	
Permit Number: BR7321IK	Compliance Officer: Victoria Griffin
Operator: Tata Steel UK Ltd	Auditor (if different): N/a
Emission Point(s): A1-A8, A12 – A15, A18, A21, A31–A33 & A35	Others Present: Senior Energy and Environment Officer (QSHE),

OMA Sections		SCORE
OMA 1 – Management of monitoring		92%
OMA 2 – Periodic monitoring and test laboratories		90%
OMA 3 – Continuous monitoring		60%
OMA 4 – Quality assurance		97%
	OVERALL SCORE	85%

OVERALL SITE ASSESSMENT COMMENTS	
	Letter
	Variation
	Enforcement

This OMA focused on the monitoring of emissions to air from No1 Colourcoat line (COBRA Regenerative Thermal Oxidiser (RTO)) (A18), No2 Colourcoat Line (A21) and No6 Galvanizing Line (direct fired furnace & radiant tube furnace stack) (A35) at TATA Steel UK, Shotton.

Periodic emission monitoring is undertaken by a dedicated MCERTS accredited inhouse team supported by an UKAS accredited inhouse laboratory. The Operator has shown that quality assurance for periodic monitoring is well managed, providing reliable monitoring data.

The CEMS used on site are not MCERTS certified. Continuous emission monitoring (CEMS) was not fully assessed as part of this OMA.

Overall, the OMA report gained a good score of 85%. In addition to the above comments, there are a few minor observations noted in this audit, along with several recommendations, which the Operator should review and act upon where necessary

Date of audit: 30-31 Oct 2024
Signed: 
Date: 29 November 2024

OMA 1: Management of monitoring		
OMA ELEMENTS	**SCORE**	**COMMENTS**
A. Documentation of management system procedures for monitoring	5	Tata Steel UK Ltd (TSUK) operate a group wide management system and is ISO14001 & 9001 accredited. The management system is facilitated and managed by the Environment and Sustainability Department at group level (herein referred to as Group). TSUK operate an accessible document management system (DMS TSUK). Documented procedures are part of the management system and apply to all relevant sites including the Shotton Colour Works Site (herein referred to as Site). The Site operates its own information management system (IMS) for the management of location specific procedures and associated information. The Emission Monitoring Management Plan (EMMP), is currently in development and whilst at the time of the audit it had yet to be issued it has been informally adopted. The EMMP is stored on the DMS and managed by group. The objective of the EMMP is to describe and facilitate the implementation of measures taken to manage and assist with compliance to emissions monitoring and emissions monitoring schedules. Emission monitoring is undertaken by TATA UK personnel. There is a Site Specific Protocol (SSP) for each emission point saved on the DMS. There are sampling procedures for both UKAS and Non-UKAS emission monitoring techniques. Links to SSPs are also embedded within the EMMP.
B. Organisational structure for monitoring	4	There is a well-defined and formally documented management structure for sampling and monitoring. Management and co-ordination of the emissions monitoring is managed by Group and led by the Environmental Lead for Monitoring. Organisational chart for emission monitoring was viewed. The chart includes the emission monitoring lead and direct reports. A responsible persons list, which includes a roles and responsibilities for emission monitoring was also provided.

C. Schedules and planning of monitoring, including contingencies	5	Periodic emission monitoring is undertaken by TATA UK personnel. A sampling schedule for all TATA UK locations is prepared at the beginning of each year in consultation with each Site QSHE department. The proposed periodic emission monitoring /sampling dates are agreed with the Site via email (viewed last email sent on 27/2/2024). Any site specific sampling limitations such as planned shutdowns, engineering works and site heating requirements are applied to the monitoring schedule. Emission sampling dates from process stacks are typically scheduled for the summer months and sampling from boilers are scheduled during the winter when the boilers are operational. The limited sampling window for boiler emissions can occasionally result in a backlog. Backlogs can be easily managed as there is a dedicated team of emission monitoring personnel with resource being tracked via a capacity model. Reliance on 3rd party contractors is limited to on-site dedicated scaffolding contractors who can readily supply the required temporary platforms with minimal notice. Prior to sampling the SSP are sent to the Site for review by the Senior QHSE officer and relevant facility personnel. The SSPs are reviewed and updated annually subject to the periodic platform and stack inspection report findings, other relevant information or changes to guidance. The management and activities associated with the CEMS is the responsibility of the works engineering department. This element was not fully assessed (refer to comments below).

D. Monitoring records and use of monitoring data	5	Monitoring records of validated data are provided to the Senior QSHE officer at the end of each day and any breaches highlighted. Monitoring records are saved and stored on the IMS. A procedure for non compliance is available on IMS (last updated 21/01/24 procedure ref 1.26.18.4). Any limit breaches are reported in SALUS (a safety, health and environment event reporting platform) and via a Schedule 5 notifications to NRW. A weekly score card of breaches /events on SALUS is shared monthly with senior management. Breaches are investigated according to risk ranging from local level (level 1 to 3) to a formal investigation via the Tata management team and external risk assessors. An emissions limit breach would typically be a level 2. Monitoring data for emissions is reviewed by QSHE dept for the works as part of the monthly meeting and discussed accordingly.

E. Understanding the requirements of the permit and monitoring methods	4	The relevant period monitoring personnel demonstrated a thorough understanding of the requirements of the permit and monitoring methods. TATA personnel carrying out any emissions monitoring have full MCERTS certification with relevant technical endorsements where applicable. Copies of relevant certificates were provided and were within date. Attendance at relevant monitoring training courses (BS EN 14181 and hazard identification and risk assessment relating to stack emissions monitoring) has been documented for all identified emission monitoring personnel. An emissions monitoring training plan is available and is managed and updated Environmental Lead for Monitoring. Non-monitoring personnel within the QSHE department at the Site completed MCERTS awareness training provided by an external provider on the 23/3/2023.
OMA 1 – SCORE	23/25	92%

SUMMARY COMMENTS FOR OMA 1

Overall, a good standard for management of periodic monitoring.

The Operator identified that an improvement would be the formal provision /identification of a deputy to take responsibility for the management of periodic monitoring. NRW concur with this observation.

There was limited understanding of the QSHE department of the processes and procedures associated with CEMS. Whilst some formalised documentation of activities was presented during the audit, the system could not readily explained. Better communication and understanding between the QSHE department and the engineering department responsible for the CEMS is imperative to ensure that the monitoring and reporting is transparent, readily repeatable and of value.

OMA 2: Periodic monitoring and test laboratories		
OMA ELEMENTS	**SCORE**	**COMMENTS**
A. Sampling provisions	3	The most recent monitoring reports (September 2024) were provided for monitoring locations A18, A21 and A35. An internal review of monitoring locations identified that the sample locations are not labelled (refer to text below).
B. Certification of equipment	5	Instrumentation used during periodic monitoring is MCERTS accredited. Inhouse monitoring contractor (TSUK) holds UKAS schedule of accreditation for monitoring and analysis of all parameters specified on the permit.
C. Measurement methods and standards	4	The methods used are listed in the permit. A UKAS audit was undertaken for accredited activities at the TSUK Sheffield laboratories and the monitoring processes at the site. No relevant non conformances were identified and two observations were made.
D. Calibration methods	5	Sampling and analytical equipment are all calibrated to MCERTS and UKAS standards where applicable.
E. Frequency of maintenance and calibration	5	All equipment involved in periodic testing has MCERTS/UKAS certification. FTIR analysers are serviced annually by Gasmet (evidence of contract was seen); routine calibrations and maintenance is done internally. Calibration and asset log v3 was viewed and is stored on DMS Calibration “stickers” summarising calibration status and due date are fixed to relevant equipment.
F. Reliability of methods and equipment (data availability)	5	Equipment has shown high reliability (above 95%) – repeat sampling and rescheduling very rare

G. Breakdown response	4	Portable samplers /analysers 2 spare FITR available. There is a service contract with GasNet which includes a priority service for FITR. The manual sampling train (MST) is not on service contract but a spare MST is available.
H. Traceability	5	Periodic monitoring is performed by MCERTS accredited contractor, using appropriate standards.
OMA 2 – SCORE	36/40	90%

SUMMARY COMMENTS FOR OMA 2
Most aspects of periodic monitoring have shown to be at a high level. However locally there is a reliance on operator "knowledge" of the site /sample locations with reference being made to historically nomenclature which has the potential to lead to discrepancies in sampling and reporting. All sample locations must be labelled correctly and correlate to the locations identified on the permit. It is recommended that site drawing are updated to reflect this.

OMA 3: Continuous monitoring – Not fully assessed.		
OMA ELEMENTS	**SCORE**	**COMMENTS**
A. Provisions for monitoring and location of continuous monitors	3	Not fully assessed. There are 3No. CEMS for the purpose of carbon monoxide monitoring in accordance with the permit.
B. Certification of continuous monitoring	3	CEMs installed (MGA3000C multi-gas analyser) are not MCERTS but previously agreed as fit for purpose. The data collection software (SAP) system is not currently MCERTS accredited.
C. Do not assess for air, water only	N/A	N/A
D. Calibration methods	N/A	Not assessed
E. Frequency of maintenance and calibration	3	Not fully assessed. CEMS are calibrated every 2 weeks by test gas. A calibration plan and test certificates are recorded /stored on the SAP (SCP 1016 – doc ref 126.46.7, last updated 19-10-2024).
F. Reliability of equipment (data availability)	N/A	Not assessed
G. Breakdown response	3	3No. spares, with potentially a further 3No. spares to become available. ADC spares also available on an ad-hoc basis.
H. Traceability	3	Not fully assessed. Calibration parameters are traceable and records are retained and available on the SAP.
OMA 3 – SCORE	15/25	60%
SUMMARY COMMENTS FOR OMA 3		
The OMA elements including the locations of the CEMS were not fully assessed.		

OMA 4: Quality assurance - Not fully assessed (periodic monitoring only).		
OMA ELEMENTS	**SCORE**	**COMMENTS**
A. External quality control schemes	5	Periodic monitoring activities are undertaken “inhouse” by a dedicated team. All periodic monitoring and sampling activities are UKAS/MCERTS accredited.
B. Internal data QC	5	Operator carries out regular documented checks for periodic monitoring data integrity and backs up data in the form of monthly reports. Non conformances are recorded on a register (NCR).
C. Competence of monitoring personnel	5	Personnel carrying out monitoring are all MCERTS certified to appropriate level (with relevant technical endorsements held). Evidence of personnel attending UKAS laboratory audit training (ISO/IEC 17025:2017) was also provided.
D. Auditing of monitoring	5	Evidence of NCR’s being tracked through the NCR database, SHREQ meetings and monthly emission monitoring meetings was provided. Internal “method witness” audit programme is in place to monitor personnel competence. Examples of method witness audit provided for review (dated 29/05/2024) which corresponds to audit records. Desk based auditing of the BSEN 14181 Report was last undertaken 21 February 2024.
E. Audit compliance	5	Comprehensive audit records are maintained. Where non conformances are identified, they are addressed and the mitigation /actions are recorded.
F. Reporting	4	Summary of report findings are submitted to NRW on time meeting the permit requirements.
OMA 4 – SCORE	29/30	97%

SUMMARY COMMENTS FOR OMA 4
A very good level of Quality Assurance shown by operator.