# Audit Report

**Stafford Bridge Doors Ltd**

**Date of Audit:** **13/04/2021**

**Auditor:** **Dale Reid / Clement Manuel**

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# EXECUTIVE SUMMARY

| | |
|---|---|
| Supplier ID: | 00020480 |
| Auditor(s): | Dale Reid / Clement Manuel |
| | |
| Audit Date(s): | 13/04/2021 |
| Supplier Name: | Stafford Bridge Doors Ltd |
| Address: | Bedford Road, Pavenham, United Kingdom, MK43 7PS |
| Tel/Fax: | 01234826316 |
| Contact Name: | Linda Fedyk |
| Title: | Administration |

| | |
|---|---|
| Introduction: | Stafford Bridge Doors Ltd, Bedford Road, Pavenham, Bedfordshire. MK43 7PS UK. Manufacture, Supply, Installation and Maintenance of security doors, locking systems, louvers, grills, secure walling systems, & associated security, blast & ballistic products. Stafford Bridge Doors Ltd; supply and install world wide. |
| Findings Summary: | A summation of the total of findings are 1x minor non-compliances and 2x observation. |

| AMALGAMATED SCORES | Percentage Score |
|---|---|
| Health & Safety | 95% |
| Environment | 89% |
| Quality | 100% |

| | |
|---|---|
| Average Amalgamated Scores | **95%** |

| Section Number | MSE Percentage Score |
|---|---|
| System Assurance and Compliance, Quality Assurance | 100% |
| System Assurance and Compliance, Health & Safety | 67% |
| System Assurance and Compliance, Environmental Management | 67% |
| Quality Control and Assurance | 100% |
| Training and Capability/Competence Assessment | 100% |
| Working Hours | 100% |
| Workplace Safety | 100% |
| Occupational Health | 100% |
| Emergency Planning | 100% |
| Environmental Management | 100% |
| Waste Management | 100% |
| Selection and Management of the Supply Chain | 100% |
| Use of Work Equipment, Vehicles and Machines | 100% |
| Insurance and Warranty | 100% |

| Critical Non-Compliances | |
|---|---|
| Question Number | Finding |
| NA | |

| Major Non-Compliances | |
|---|---|
| Question Number | Finding |
| NA | |

| Minor Non-Compliances | |
|---|---|
| Question Number | Finding |
| 1.1 | Due to deficiencies identified with the environmental, health and safety section of the audit, this sections score has been reduced. |

| Observations | |
|---|---|
| Question Number | Finding |
| | |
| 1.1 | There was scope for the company to have its 14001 and 45001 management systems certified by a UKAS accredited third party. |
| 3.1 | There was no documented period provided for conducting reinductions. |

| PQQ Discrepancies | |
|---|---|
| Question Number | Finding |
| NA | |

| Positive Elements | |
|---|---|
| Question Number | Finding |
| NA | . |

End

# Introduction

| | |
|---|---|
| **Scope of company and regions of supply:** | Stafford Bridge Doors Ltd, Bedford Road, Pavenham, Bedfordshire. MK43 7PS UK.<br>Manufacture, Supply, Installation and Maintenance of security doors, locking systems, louvers, grills, secure walling systems, & associated security, blast & ballistic products.<br>Stafford Bridge Doors Ltd; supply and install world wide. |

## 1.0 System Assurance and Compliance

| | | MSE |
|---|---|---|
| **1.1** | **Can the company demonstrate that their Quality Management Systems are assured?** | 3 |
| | **Can the company demonstrate that their Health & Safety Management Systems are assured?** | 2 |
| | **Can the company demonstrate that their Environmental Management Systems are assured?** | 2 |
| | Does the company have any formal 3rd party certification for their management systems as awarded by an independent accreditation body for quality, health and safety, environment or social responsibility? | Y |
| | Does the company's accreditation apply to more than one country if the company has international operations? (if yes please detail countries) | NA |
| | Is the accrediting body registered with the UKAS or other international equivalent? | Y |
| | Where 3rd party accreditation has not been achieved is the company prepared to operate adopt their clients Quality, Health & Safety and Environmental Management Systems? | NA |

**Evidence Required**

Certification Certificates

**Supplier Response**

Stafford Bridge Doors have ISO 9001 2015 certification. Certification body BRE.

**Documents Provided**

1.1_QMS Certificate.C516-2 03 Stafford Bridge Doors Limited.2018-2021

**Assessor Evaluation**

The company provided evidence of their ISO 9001:2015 (certified by BRE Global Ltd (LPCB) UKAS No 0007) which covered the following scope: Design, manufacture and installation of timber and steel doorsets, walling and ventilation louvre panels for: security, fire, ballistic, blast and acoustic protection.

**Observation:** There was scope for the company to have its 14001 and 45001 management systems certified by a UKAS accredited third party.

**Minor Non-Compliance:** Due to deficiencies identified with the environmental, health and safety section of the audit, this sections score has been reduced.

| | | | |
|---|---|---|---|
| **CQ** | **1.2** | **Can the company demonstrate compliances with the Construction, Design and Management Regulations?** | 3 |

| | |
|---|---|
| Does the company undertake any activities that fall under the CDM regulations? | Y |
| Has the company identified and documented its responsibilities as defined within the CDM regulations e.g. Principal Designer, Designer, Principal Contractor? | Y |
| Do company management systems clearly identify processes for meeting and discharging duties as required by the CDM regulations? | Y |

**Evidence Required**

Procedures / processes detailing identification and meeting of responsibilities under CDM 2015.

**Supplier Response**

Stafford Bridge Doors is fully aware of its responsibilities with regard to the CDM Regulations 2015. Risk assessments and method statements (RAMS) are carried out for all Installation & Maintenance work. Work will not commence until the RAMS have been issued to & approved by the Client/Principal Contractor/Site Management which ever is appropriate and issued to the installation team.
Stafford Bridge Doors (SBD) carry out installation work as Contractors under the direction of Customer Principal Contractor/Designers. No installation work is carried out unless the Principal Contractor/Site Management has provided sufficient information and facilities to allow SBD to carry out the installation operations safely and in line with the Main Contractors/Site Management programme. Installation work will not commence until RAMS have been completed and issued. If, when attending site, the conditions identified in the RAMS change, then installation work will be suspended until a re-assessment has been undertaken. Ref H&S Manual **page 54**

**Documents Provided**

| |
|---|
| 0_SM Group HS Policy 2021-02-02-Page 54-CDM |
| |
| |
| |

**Assessor Evaluation**

The company acted as a contractor to the PC whilst working on client sites. Policies covering the requirements of a contractor and commercial client were provided. Each explained the company's undertakings.

Section Score 10

## 2.0 Quality Control and Assurance

MSE

**2.1** **Does the company have a formally approved Quality Management policy statement?** 3

| | |
|---|---|
| Is the policy statement signed and endorsed by the most senior management representative? | Y |
| Does the policy relate to the company activities? | Y |
| Is the period for review documented? | Y |

**Evidence Required**

Quality Policy Statement

**Supplier Response**

Stafford Bridge Doors maintain a QMS certified to ISO9001-2015

**Documents Provided**

2.1_QMSSBD_0001 QM.PolicyDoc

**Assessor Evaluation**

A copy of the current Quality Policy statement had been provided. It was found to relate to the company's activities and had been signed by the MD. The policy was reviewed annually (next due 02/02/2022).

**2.2** **Does the company use processes or systems for the management and control of documentation?** 3

| | |
|---|---|
| Is there a documented management procedure for document control? | Y |
| Does the Document Control system identify the key documents requiring management? | Y |
| Is there a process in place for withdrawing and re-issuing of updated documents? | Y |
| Does the process include document archiving? (Is there a retrieval process for the archived document) | Y |
| Is there a process or system in place for the secure disposal of confidential documentation? | Y |
| Is there a master list of controlled documents? | Y |

**Evidence Required**

Document Control Procedure

**Supplier Response**

Stafford Bridge Doors (and the Surelock McGill Group) maintain a certified QMS to ISO9001:2015. The document control process is included in the certification audits carried out by the CB (BRE/LPCB)

**Documents Provided**

2.2_QMSSMGroup_0001 Document Control

**Assessor Evaluation**

The QMS Manual and supporting procedure (QMSSMGroup_0001 Document Control) explained the process of document and record control. The procedure contained a documents list which detailed the document type, controls, issue, record information, retention and disposal.

**2.3** **Does the company have a controlled and documented process for the hand over of completed works?** 3

| | |
|---|---|
| That the company manages the documentation and process of completion of agreed contractual work. | Y |
| Does the company specify how long handover records will be retained? | Y |

**Evidence Required**

Quality control procedure
Client handover documents (or equivalent)
Completed job sheets (or equivalent)

**Supplier Response**

All installation and maintenance work is signed for by a customer/client/site management representative which ever is available.
See page 8 of 2.2_QMSSMGroup_0001 Document Control

**Documents Provided**

| |
|---|
| 2.3_S419Q02C.Form.InstHandOver.SBD |
| 2.3b_Sales Order File Contents. SBD-Example |
| |
| |

**Assessor Evaluation**

The company provided evidence of a templated version of the installation inspection and handover sheet. This contained the levels of inspection to be conducted prior to handover to the client. The sheet had space for the client to sign off to acknowledge receipt of keys etc, and the satisfactory completion of works.

**2.4** **Does the company have in place an internal auditing/inspection programme?** 3

| | |
|---|---|
| Are the audits at regular/programmed intervals? | Y |
| That the company has specified a minimum competency level for personnel undertaking audits / inspections. | Y |
| Does the company ensure all areas of the business are covered by this programme? | Y |
| Does the internal audit process include contract / customer specific requirements? | Y |

**Evidence Required**

Internal auditing procedure
Previous audit/inspection reports
Roles and responsibilities
Job descriptions
Organisation charts

**Supplier Response**

Stafford Bridge Doors maintain a certified QMS. The internal audit process is included in the certification audits carried out by the CB (BRE/LPCB)

**Documents Provided**

| |
|---|
| 2.4a_QMSSMGroup_0002 Internal Audit |
| 2.4b_Audit Schedule.SBD.2021 |
| 2.4c_Audit Schedule 2020.Stafford Bridge-20-12-01_A |
| 2.4d_Internal audits-SBD 2020_Examples |
| 2.4e_Training.Record.Chad Dunton |
| |

**Assessor Evaluation**

The QMS manual and supporting procedure (QMSSMGroup_0002 Internal Audit) explained the internal audit process covering the requirements for ISO 9001:2015 and the company's business specific needs. The audit schedule noted the area/process to audit including health, safety and environmental audits. A copy of a recently completed audit was provided as evidence.

Section Score 12

## 3.0 Training and Capability/Competence Assessment

**CQ** **3.1** **Does the company induct new workers into the business when they first start on site? (This should include employees, sub-contractors, self employed and visitors)** 3

| | |
|---|---|
| Are records of induction held? | Y |
| What mechanisms are used for induction delivery? | |
| That the induction process covers at least: | |
| Company structure | Y |
| Roles and responsibilities | Y |
| Training and competency requirements | Y |
| Relevant legislative and regulatory requirements | Y |
| Site-specific requirements e.g. welfare facilities/safety risks | Y |
| Emergency procedures e.g. warning signals/first aid issues | Y |
| Code of Conduct | Y |
| Accident/hazard reporting - what to do | Y |
| Is there a documented period for reinducting / rebriefing personnel and applicable personnel? | N |

**Evidence Required**

Induction process/procedures
Induction records
Employee training records
Site induction records

**Supplier Response**

All employees are given an induction interview. A check list is completed. Visitors are escorted at all times. Maintenance contractors working at Stafford Bridge Doors works are required to submit RAMS.

The appropriate on-going training for personnel is identified and delivered as necessary. All training is continually reviewed and is discussed at H&S Committee meetings. All installation personnel are CSCS card holders plus other relevant certificate/cards e.g. IPAF UKARTA etc. which are periodically updated.
Minutes of meeting attached.
See training matrix attached.
Sample of certificates attached.
A workshop skills matrix has been introduced and is under development. Example attached ref 3.1m_Competence matrix for operators_Jan 2021 Example

**Documents Provided**

| |
|---|
| 3.1a_QMSSMGroup_0004A Form. Induction Training Check list |
| 0_SM Group HS Policy 2021-02-02-Page 84-Training |
| 3.1b_Minutes of Health and Safety Meeting - 2021.03.02 Issued |
| 3.1c_Minutes of Health and Safety Meeting - 2021.01.12 |
| 3.1d_SBD TRAINING MATRIX - 21-01-21_ISSUED |
| 3.1e_ASBESTOS.DARREN PHILIP PERKINS.UKATA.2021-11-30 |
| 3.1f_ASBESTOS.DAVE RAWLINGS-26.07.21 |
| 3.1g_Asbestos.IAN SPRIGGS.UKATA.EXPIRES 2021-06-14.pdf |
| 3.1h_CSCS.David Rawlings.Exp June 2023 |
| 3.1i_CSCS.ROBERT HARTWELL.EXPIRES DEC 2023 |
| 3.1j_CSCS.Steve Bradley.Exp 20-08-31 |
| 3.1k_FIRST AID.Dave Rawlingst_Exp 23-10-14 |
| 3.1l_RISK ASSESSMENT TRAINING.DAVE RAWLINGS-26.07.21 |
| 3.1m_Competence matrix for operators_Jan 2021 Example |

**Assessor Evaluation**

A templated induction had been provided as evidence of the induction process used. This covered the relevant policies, procedures, job specific information and any specific training requirements/Needs that are identified.

**Observation:** There was no documented period provided for conducting reinductions.

**3.2** **Has the company identified all work activities relating to their scope of service that requires formal training?** | 3

| | |
|---|---|
| Is a training matrix is in place for all categories of worker? | Y |
| If the company does not utilise a matrix format do they have any other system to record what training is required for each job? | Y |
| Does the training process confirm competency/capability requirements as well as training needs? | Y |
| What systems does the company have in place to identify new training requirements relating to changes in scope of services being provided? | Y |

**Evidence Required**

Training matrix
Employee records
Job descriptions
Organisation chart

**Supplier Response**

Installation team personnel receive appropriate training as necessary. Updates carried out e.g. PASMA, UKATA, CSCS, etc as required.
Works personnel receive training as identified and required.
See response to 3.1

**Documents Provided**

| |
|---|
| 3.1d_SBD TRAINING MATRIX - 21-01-21_ISSUED |
| |
| |
| |

**Assessor Evaluation**

The company had logged their competencies using a matrix. R = Training Required, I = Training in Progress I, T = Trained - Able to work unsupervised, S = Supervisor - able to train others and Blank Untrained.

**3.3** **Is there a system in place to ensure that existing training certificates /licences held by individuals are checked and validated on a regular basis?** 3

Are licences for operating plant and equipment or for specific trades checked for validity when presented by new workers joining the company who already possess the certification? Y

**Evidence Required**

Training matrix
Employee records
Job descriptions
Organisation chart

**Supplier Response**

Training requirements and updates are reviewed & checked using the training matrices and assessment of requirements.

**Documents Provided**

3.1d_SBD TRAINING MATRIX - 21-01-21_ISSUED

**Assessor Evaluation**

All competencies were checked as part of the standard induction. Records were kept on the training matrix.

Section Score 9

## 4.0 Working Hours

| | | |
|---|---|---|
| **4.1** | **Does the company keep records of all workers standard and overtime working hours?** | 3 |

| | |
|---|---|
| Does the company have a controlled mechanism for the management and monitoring of working hours? | Y |
| Is any overtime undertaken on a voluntary basis? | Y |

**Evidence Required**

Employee Handbooks
Timesheets
Employee Files

**Supplier Response**

Working hours are as set out in the job specifications and employee handbook.
Attendance records are held in computer systems. No paper records are available.
All overtime is voluntary
The option to sign a Working Time Directive Op-Out agreements is made available to all personnel.
Example attached re 4.1c_Working Time Op Out agreement Example

**Documents Provided**

| |
|---|
| 4..1a_Roll Call sample |
| 4.1b_Screenshot-Time sht-2021-02-03 Example |
| 4.1c_Working Time Op Out agreement Example |
| 4.1d_Time record report - weekly_Sample |
| 01_SMGHandBook.2015 01 12. |

**Assessor Evaluation**

Working time and hours were captured electronically. It was confirmed that overtime was conducted on a voluntary basis and that working time opt agreements were used for compliance with the working time directive.

Section Score 3

## 5.0 Workplace Safety

| CQ | 5.1 | **Does the company have established processes to ensure compliance to legal and other legislative requirements that are applicable?** | 3 |
|---|---|---|---|

| | |
|---|---|
| Demonstrate organisational subscriptions | Y |
| Has the company established, implemented and maintained procedures to identify and access all legal and other requirements. | Y |

**Evidence Required**

Document register
Records of competent advisors
Document control procedures

**Supplier Response**

H&S competent advice is given by Kingfisher Professional Services Ltd.
Product type approval testing is carried out to meet LPCB (ref LPCB Red Book Live), BS, UL and UK Government (CPNI) standards and requirements.

**Documents Provided**

5.1a_Kingfisher-Certificate of Engagement-Stafford Bridge-2019-2022
5.1b_Jeremy Sayle CV.1218

**Assessor Evaluation**

Principal Legislation was referenced throughout the Group Health & Safety Policies and Responsibilities manual. The company used the services of a third party consultant to ensure they remained compliant with current legislation.

| 5.2 | **Does the company have a person who has delegated responsibility for workplace and product safety?** | 3 |
|---|---|---|

| | |
|---|---|
| Are the corporate responsibilities for this person defined in a job description? | Y |
| Does the delegated person holds qualifications / professional memberships appropriate to the role e.g. Nebosh / IOSH / IIRSM? | Y |
| If the company is part of a larger group is there a corporate reporting structure from the local facility to the Group Head responsible for Safety? | NA |
| Does the company split the responsibility for workplace and product safety? (Specify how this works) | N |

**Evidence Required**

Health and Safety Policy
Job Description
Organisation chart
Contract of Services if provided by a third party

**Supplier Response**

Chris Wood - Workplace H&S
Peter Covington - Workplace H&S
Jim Russel - Workplace H&S
Chad Dunton - Product testing and compliance

2.1_QMSSBD_0001 QM.PolicyDoc - sect 3.1 page 7
0_SM Group HS Policy 2021-02-02-Page 7-SBD Org Chart

**Assessor Evaluation**

The MD held overall responsibility for Health & Safety within the company. Professional advice and guidance were provided by an external consultant (JS). The consultant held a NVQ level 4 (level 5 equivalent) Diploma in Occupational Health & Safety Practice and was a Chartered Member of IOSH.

| | | | |
|---|---|---|---|
| CQ | 5.3 | **Does the company have control measures in place to reduce / remove identified Health and Safety Risks** | 3 |

| | |
|---|---|
| Has the organisation established, implemented and maintained documented procedures to identify hazards/impacts and assess risks? | Y |
| Has the company developed its methodology for hazard identification, risk assessment and risk control, based on operational experience? | Y |
| Does the company use all forms of Risk Assessment including; Generic, Dynamic, site specific etc.? (Assessor to detail the risk control processes in place) | Y |
| Does the company have a process to manage works completed under a permit to work system issued by the company or by a principle contractor? | Y |

**Evidence Required**

Health and Safety Policy
Risk Assessments
Risk assessment procedures
Permit to work systems

**Supplier Response**

Risk assessments and method statements and produced for all installation work.
Risk assessments are maintained for in-works processes and areas.

**Documents Provided**

| |
|---|
| 0_SM Group HS Policy 2021-02-02-Page 33 & 80 |
| 5.3a_S-016328-Confidential-SIGNED RAMS-Print |
| 5.3b_S-016618-Confidential-SIGNED RAMS_Print |
| |

**Assessor Evaluation**

Evidence of robust risk assessment process being used was provided along with copies of completed and communicated risk assessments.

| CQ | 5.4 | **Does the company have a communication process to provide guidance to the workforce on workplace safety issues?** | 3 |
|---|---|---|---|

| | |
|---|---|
| Does the company utilise a variety of different methods of communication? (Specify methods used) | Y |
| Does the company keep a formal record of all communication/briefings issued? | Y |
| Does the company verify that mechanisms for communication with personnel with poor / non-local language skills are appropriate and that hazards are understood? | NA |
| How does the company ensure subcontractors are included within briefing and communication programmes? | Y |

**Evidence Required**

Communications procedures
Employee handbook
Toolbox Talks (or equivalent)
Bulletins & Briefing Notes
Induction processes

**Supplier Response**

All H&S, Quality and Environmental information is given out as necessary. Where training is required then this is arranged and recorded.
RAMS are produced for all installation work. RAMS are issued to the installation teams & any specific details covered prior to work commencing.
All new employees receive Induction training. Company Handbook is issued to all new personnel. Specific training is provided as required e.g. CSCS, etc.

**Documents Provided**

| |
|---|
| 01_SMGHandBook.2015 01 12. |
| 0_SM Group HS Policy 2021-02-02-Page 16, 17, 56 & 56 |
| 5.4a_Minutes of Health and Safety Meeting - 2021.01.12 |
| 5.4b_Minutes of Health and Safety Meeting - 2021.03.02 |

**Assessor Evaluation**

The company provided evidence of the employee handbook and safety meetings being used as communication methods. Other methods encountered during the audit included the induction process and the H&S Manual.

| 5.5 | **Does the company develop and implement initiatives to improve workplace safety?** | 3 |
|---|---|---|

| | |
|---|---|
| Can the organisation demonstrate how it identifies and quantifies areas of improvement relating to Health & Safety? | Y |
| Can the organisation demonstrate how it develops programmes to rectify and improve upon Health & Safety performance? | Y |

**Evidence Required**

Communications procedures
Employee handbook
Toolbox Talks (or equivalent)
Bulletins & Briefing Notes

**Supplier Response**

Risk assessments and method statements are communicated to personnel as necessary.
Monthly H&S committee meetings are held to review requirements and actions required.
All H&S, Quality and Environmental information is given out as necessary. Where training is required then this is arranged and recorded.

**Documents Provided**

| |
|---|
| 5.4b_Minutes of Health and Safety Meeting - 2021.03.02 |
| 5.3a_S-016328-Confidential-SIGNED RAMS-Print |
| 2.4d_Internal audits-SBD 2020_Examples |
| |

**Assessor Evaluation**

H&S meetings, risk assessments and internal audits were used as a method of driving workplace health and safety performance.

| | | | |
|---|---|---|---|
| CQ | 5.6 | **Can the company demonstrate that they issue appropriate Personal Protective Equipment (PPE) to all workers (migrant workers, contract/ labour, full-time) that may be exposed to workplace hazards?** | 3 |

| | |
|---|---|
| Were issue lists provided as evidence? | Y |
| Can the company demonstrate that all workers have been given guidance on the proper handling, storage and use of PPE? | Y |
| Is there a period of time for the retention of PPE records? | Y |
| Is there a methodology used to identify type of equipment that needs to be used? | Y |
| Does the company issue agency labour with PPE (with records of issue retained) or if not does the company retain records of inspection of Agency labour PPE documenting that it meets the company's standards and legislative requirements? | NA |
| Is there a disciplinary procedure linked to failure to wear required PPE? | Y |
| When self employed workers/ sub contractors attend site with their own equipment does the company check its suitability? | NA |
| Can the company demonstrate that all PPE is issued free of charge to all workers? | Y |

**Evidence Required**

PPE Issue Record
Training records
Employee Records

**Supplier Response**

PPE is issued as required and as identified from risk assessments. All PPE is issued free of charge.
Footwear is limited to £50 (unless special footwear is required).
NB: Stafford Bridge Doors do not use agency or sub-contract labour.
Any failure to comply with H&S rules is considered misconduct or gross misconduct. Any incident is dealt with as set out in the Surelock McGill Group Employee Handbook Section 13 page 39 to 44.
Section 13.7 Misconduct & Gross Misconduct refers.
See 1.0_Surelock McGill Group Employee Handbook pages 39 to 44.

**Documents Provided**

| |
|---|
| 0_SM Group HS Policy 2021-02-02-Page 28 & 74 |
| 3.1d_SBD TRAINING MATRIX - 21-01-21_ISSUED |
| 5.6_PPE FORMS Examples |
| |

**Assessor Evaluation**

The company were able to demonstrate that PPE was issued free of charge to its staff. The employee handbook detailed the disciplinary process for failure to comply with the PPE requirements.

| | | |
|---|---|---|
| 5.7 | **Can the company demonstrate that they have assessed the hazards associated with applicable chemicals and/or hazardous substances?** | 3 |

| | |
|---|---|
| Does the company have a process or system in place to ensure that up to date data sheets are obtained? | Y |
| Are all copies of data sheets retained in a register? | Y |
| Has the company undertaken COSHH Assessments of all applicable substances? | Y |

**Evidence Required**

COSHH Register

**Supplier Response**

COSHH register is maintained. Assessments are produced. Data sheets are kept on file as paper copies and copied and filed electronically.
Product & Safety data sheets are checked when assessments are reviewed

**Documents Provided**

| |
|---|
| 5.7a_COSHH.Register.Mar 2021.Issued.pdf |
| 5.7b_154-COSHH RA-Norseal FireWizard 310ml |
| 5.7c_154-COSHH RA-Norseal FireWizard 310ml |
| 5.7d_145 - COSHH RISK ASSESSMENT.Everbuild Fire Mate Sealant C3 |

**Assessor Evaluation**

The company provided a copy of their COSHH Register and copies of COSHH assessments for the chemicals listed. Evidence of MSDS were also provided for applicable substances used.

| 5.8 | **Does the company have arrangements in place for investigating and reporting of Accidents and Incidents and Near Misses in their worksites?** | 3 |
|---|---|---|

| | |
|---|---|
| Does the company have a nominated person who reports all accidents and incidents to government agencies and where applicable a corporate Head Office? | Y |
| Does the company maintain records of accidents and incidents (This includes safety & environmental incidents)? | Y |
| Does the company have a documented process for undertaking investigations into accidents/incidents and near miss occurrence? | Y |
| Does the company produce and analyse Accident and Incident Statistics? | Y |
| Can the company demonstrate that lessons have been learned and applied from incidents? The Assessor should record what improvements have been implemented. | Y |
| Has the company had any prohibition or Improvement notices in the last 5 years? (Assessor to check http://www.hse.gov.uk/notices/ as part of audit) | Y |
| Has the company had any HSE Prosecutions within the last 5 years? (Assessor to check http://www.hse.gov.uk/prosecutions/ as part of audit) | N |
| Jump to Accident and Incident Statistics | |

**Evidence Required**

Accident and Incident Reporting Procedure
Accident and Incident Investigation Procedure
Records of Accidents, Incidents and Investigations
Training Matrix

**Supplier Response**

Accident book is maintained. A data base is used to record and analyse trends etc. and to determine any actions required. Accident log is reviewed at the monthly H&S committee meetings.
Details of HSE prohibition & improvement notices attached.

**Documents Provided**

| |
|---|
| 5.8a_Accident Analysis |
| 5.8b_SBD - HSE Enforcement Notice - Report |
| 0_SM Group HS Policy 2021-02-02-Page 13 & 47 |
| |

**Assessor Evaluation**

The company had a communicated process for the reporting and investigation of accidents, incidents and near misses. The company had received 2x improvement notices and 1x prohibition notice in May of 2018.

Section Score | 24

## 6.0 Occupational Health

**6.1 Does the company have a nominated person who has responsibility for occupational health / industrial hygiene?** 3

| | |
|---|---|
| Does this person have defined responsibilities as part of the management system? | Y |
| Does the company use the services of a third party (Can be private or government operated facility) medical centre/hospital for the delivery of occupational/worker health services? | Y |
| If an accountable person is not identified within the company, what systems are in place to ensure the health and hygiene of employees? | |

**Evidence Required**

Organisation Chart
Job description

**Supplier Response**

Chris Wood Technical & Production Manager & Peter Covington Production Manager are responsible for in-works H&S matters.
Steve Bradley is responsible for installation H&S matters.
No health issues have been identified. Dust levels are monitored in the works,
LEV assessments are carried out periodically.
A health surveillance programme has been introduced. Details of requirements are reviewed at H&S meetings.
Because of the COVID 19 restrictions, the health surveillance programme has been postponed. Due to resume May 2021.
Example of documentation is from previous year.

**Documents Provided**

| |
|---|
| 6.1a_PO.K2 Associates.Health Surveillance 2019-2020.Print |
| 6.1b_Health Surv Example 2019 - Surv Report |
| 6.1c_Health Surv Example 2019 - Fit For Work cert |
| 0_SM Group HS Policy 2019-05-01-Page 22 & 60 |
| 6.1d_EMail_Health surveillance postpone_2020-11-17 |
| 6.1e_EMail_Health surveillance New Dates_2021-03-26. |

**Assessor Evaluation**

The MD was noted as being ultimately responsible for Occupational Health. The company used the services of a third party - K2 Associates to provide occupational health and safety monitoring. Evidence including a redacted health surveillance report were provided.

**CQ** **6.2** **Does the company undertake any Health (medical) Surveillance screening/monitoring/testing of their workforce?**

3

Does the company and subcontractors have documented processes for ensuring employee fitness for work? Do requirements include Drug and Alcohol testing?

Y

**Evidence Required**

Occupational Health policy/procedure

**Supplier Response**

Stafford Bridge Doors Ltd do not use sub-contractors.
A health surveillance programme has been introduced. Details of requirements are reviewed at H&S meetings.
Health surveillance programme is set up to run annually.
Employees exposed to hazardous substances – any substances used by the installation personnel will be listed on the RAMS and use, max exposure times, etc. are explained as required. Most jobs only involve substances such as silicon frame sealant, decorators caulking (please note; Stafford Bridge Doors DONOT undertake decoration) intumescent sealant, all of which are classified as non-hazardous.
Employees exposed to HAVS – This is listed on the installation RAMS to cover the use of hammer action drills to fit frames into the wall openings. The jobs that require use of hammer drills is approximately 5% of all work, most installations are into steel or timber lined openings. The use and exposure is as stated on the RAMs, i.e. max 8 minutes at any one time, max 1 hour in any 8 hours. The operation would, on a typical job, be shared by at least 2 of the 3 installers.
See also notes in section 6.1 re Health Surveillance Programme.

**Documents Provided**

| |
|---|
| 6.1a_PO.K2 Associates.Health Surveillance 2019-2020.Print |
| 6.1b_Health Surv Example 2019 - Surv Report |
| 6.1c_Health Surv Example 2019 - Fit For Work cert |
| 0_SM Group HS Policy 2019-05-01-Page 22 & 60 |

**Assessor Evaluation**

A drugs and alcohol policy had been provided within the employee handbook by the company. Further health surveillance was provided by the third party health provider.

Section Score 6

## 7.0 Emergency Planning

**7.1 Does the company have a controlled process for the identification and implementation of emergency arrangements?** 3

| | |
|---|---|
| Does the company have controlled processes for the identification and implementation of work site specific emergency arrangements? | ¥ |
| Has the company quantified minimum medical provision and support within the emergency plan? | ¥ |

**Evidence Required**

Emergency Procedures
Fire evacuation plans
Risk Assessments
Records of Fire Drills
Equipment testing certificates

**Supplier Response**

Evacuation plans are displayed at or near exit points through out buildings.
Fire extinguishers, emergency lighting and fire alarms are inspected/tested each year by outside contractor.
Fire drills are carried periodically.
The fire risk assessment review was missed for 2020 this is been carried out in April 2021 as note in March 2021 H&S Committee minutes 03.1b_Minutes of Health and Safety Meeting - 2021.03.02 Issued)

**Documents Provided**

| |
|---|
| 7.1a_Stafford Bridge Doors Fire Risk Assessment.19-03-12 |
| 7.1b_Fire Marshalls |
| 7.1c_Equipment.Certificates&Report.Fire Alarm, Emerg Light Insp & Fire Extg Insp |
| 7.1d_.Emergency evacuation details.18-02-01 |
| 7.1e_Fire drill records examples |
| 7.1f_Fire Drill 22012021_Roll Call |

**Assessor Evaluation**

The company had provided evidence of emergency procedures, testing, servicing of emergency equipment and training of personnel. The last fire drill was conducted on the 22/01/2021.

Section Score 3

## 8.0 Environmental Management

**8.1 Does the company have an environmental policy statement?** | 3

| | |
|---|---|
| Is the policy statement signed and endorsed by the most senior management representative? | Y |
| Does the policy relate to the company activities? | Y |
| Commit the company to a continuous improvement programme and ensures compliance with all relevant environmental legislation or industry guidance? | Y |
| Does it identify how environmental issues will be communicated? | Y |
| Is the period for review detailed? | Y |

**Evidence Required**

Environmental Management Policy

**Supplier Response**

SBD have Environmental documentation in place. This is in line with, and approved by, UK Government requirements. In addition to this, consideration is being given to a formal EMS in line with ISO14001.
SBD activities have little or no environmental impact.
A Group Environmental policy document and statement is available and all employees are made aware of the legal requirements and company policy.
All timber waste (off cuts, saw dust, etc.) is recycled either in house or via licensed collection company.

**Documents Provided**

8.1a_EN0001.Environmental Management Policy Doc
8.1b_EN0002.LegalRegister.SBD
8.1c_EN0003.EnvironmentalAspectsRegister.SBD.Issue_D
8.1a_EN0001.Environmental Management Policy Doc

**Assessor Evaluation**

An Environmental Policy Statement had been produced which related to the company's activities, was dated 03/02/2021 and was endorsed by the Group Managing Director. The policy also includes evidence of its periodic review.

**8.2 Are the company's environmental management systems documented?** | 3

| | |
|---|---|
| Does the system document the company's environmental responsibilities? | Y |
| Are details of the communication process detailed? | Y |
| Are responsibilities clearly defined? | Y |
| Is there an inspection and audit regime? | Y |
| Are emergency procedures detailed? | Y |
| Is there written sections on waste and recycling? | Y |
| Does the company have a policy on sourcing materials / procurement strategy? | Y |
| Is there written sections on the management of subcontractors? | NA |
| Does the system detail the measures to be taken in the design process? | NA |
| Does the systems establish legal requirements including creation and maintenance of a register of legislation / changes to legislation? | Y |

**Evidence Required**

Environmental Management Manual

**Supplier Response**

SBD activities have little or no environmental impact.
SBD continue to developing formal Environmental Control procedures.
A Group Environmental policy document and statement is available and all employees are made aware of the policy.
Environmental Awareness courses are and have been introduce. Senior management personnel have taken/are to take the course. See Training Matrix. It is intended that all installation personnel be trained.
All timber waste (off cuts, saw dust, etc.) is recycled either in house or via licensed collection company.
Environmental aspects included in audit schedule

**Documents Provided**

8.1a_EN0001.Environmental Management Policy Doc
8.1b_EN0002.LegalRegister.SBD
8.1c_EN0003.EnvironmentalAspectsRegister.SBD.Issue_D
8.1b_EN0002.LegalRegister.SBD
2.4b_Audit Schedule 2021.Stafford Bridge-21-01-12

**Assessor Evaluation**

The company's EMS had been noted within the Environmental Policy Document. This was based around the requirements of the 14001:2015 standard. The arrangements had been formalised and were checked as part of the company's ongoing audit regime. A legal register was provided that was reviewed on 10/11/2020.

| | | | |
|---|---|---|---|
| | 8.3 | **Does the company manage the Aspects and Impacts associated with their scope of services?** | 3 |

| | |
|---|---|
| Are these processes documented in the form of a register or similar? | Y |
| Does the company have a formal communication process for communicating the content of the register? | Y |
| Is there evidence of a periodic assessment and evaluation of the content? | Y |

**Evidence Required**

Aspects and impacts register

**Supplier Response**

SBD activities have little or no environmental impact.
SBD continue to develop a formal Environmental Control procedures.
A Group Environmental policy document and statement is available and all employees are made aware of the policy.
Environmental Policy is reviewed yearly.
All timber waste (off cuts, saw dust, etc.) is recycled either in house or via licensed collection company.

**Documents Provided**

8.1c_EN0003.EnvironmentalAspectsRegister.SBD.Issue_D

**Assessor Evaluation**

The company have provided a copy of their Aspects & Impacts Register covering the scope of their business operations. The register was last reviewed on the 27/05/2020.

| | | | |
|---|---|---|---|
| CQ | 8.4 | **Does the company have control measures in place to reduce/remove identified environmental risk?** | 3 |

| | |
|---|---|
| Does the company use data from maintenance programmes / operations to enhance controls processes? | Y |
| Does the Internal auditing regime monitor the control measures in place? | Y |
| Are inspections received from government agencies? | NA |

**Evidence Required**

Environmental Risk Assessments
Site Environmental Management Plans

**Supplier Response**

SBD continue to develop formal Environmental Control procedures & policies.
With ref to installation work - Environmental issues are considered during the site surveys. SBD activities have little or no environmental impact

**Documents Provided**

8.1c_EN0003.EnvironmentalAspectsRegister.SBD.Issue_D
8.1a_EN0001.Environmental Management Policy Doc
5.3b_S-016618-Confidential-SIGNED RAMS_Print

**Assessor Evaluation**

As well as the Aspects & Impacts Register, the RAMS produced by the company contained further control measures to help reduce any risk to the environment.

Section Score **12**

## 9.0 Waste Management

**CQ** **9.1** **Does the company ensure that it disposes of all its waste in a legal and proper manner?** 3

| | |
|---|---|
| Does the company use a formal transfer note process? (Specify how this works) | Y |
| Do they use licensed waste companies and licensed waste carriers? (Specify if company has to be subject to government licensing programme) | Y |
| Do they have access to up to date waste legislation? | Y |
| If burying the waste are they using authorised sites? | NA |
| Transfer to authorised/licensed waste management company? | Y |
| Where applicable can the company demonstrate that it complies with the Waste Electrical and Electronic Equipment (WEEE) Regulations 2013. | NA |

**Evidence Required**

Waste transfer processes
Use of registered waste carriers

**Supplier Response**

All refuse & waste is collected by licensed companies.
Any waste resulting from installation work (this is minimal) is either disposed of on site as authorised by the main contractor/site management or returned to works in company vans.
SBD have a waste transfer licence

**Documents Provided**

| |
|---|
| 9.1a_WasteCarrierRegistrationCertificate.SBD-CBDU200894.2023-10 |
| 8.1a_EN0001.Environmental Management Policy Doc |
| 9.1b_Licence.B&W Waste Management Services.CBDU197955-Ex102023 |
| 9.1c_Licence.Waste King.CBDU93920-Ex032022 |
| 9.1d_Waste Transfer notes-Veolia_Refuse collection_Oct 20 to Sept 21 |
| 9.1e_Waste Transfer notes-WasteKing_21-03-18 |

**Assessor Evaluation**

The company were able to provide copies of waste transfer notes being retained and copies of the waste management licences for the providers used.

Section Score 3

## 10.0 Selection and Management of the Supply Chain

**10.1** **Has the company appointed a management representative with overall authority for subcontractor / supplier selection and management?** 3

| | |
|---|---|
| Detail the job title within the question evidence. | Y |
| Are deputies within the company in the absence of the representative? | Y |

**Evidence Required**

Organisational Chart
Job Description
Roles and Responsibilities

**Supplier Response**

All purchasing is controlled under the established and certified QMS. Ref 10.1a_QMSSBD_0005 ProcessAnalysisStaffordBridgev - Purchasing Section.
No material is procured without a purchase order.
Suppliers are selected on merit and approval.
Suppliers are required to complete a Supplier Questionnaire

**Documents Provided**

| |
|---|
| 10.1a_QMSSBD_0005 ProcessAnalysisStaffordBridge |
| 10.1b_QMSSBD_0010 Form.SupplierQuest.StaffordBridge |
| 10.1c_QMSSMGroup_0005 Supplier Approval |
| |

**Assessor Evaluation**

The senior management team were responsible for appointing suppliers. A supplier approval procedure had been produced and communicated. A PQQ form was used to aid with the process. Final approval was given by the MD.

**10.2** **Does the company ensure effective management of their supply chain?** 3

| | |
|---|---|
| Does the company maintain an approved supplier list? | Y |
| Has the company got a process for the evaluation/ selection of contractors/ suppliers, to include PQQ, pre start H&S inspections of activities? | Y |
| Has the company identified the minimum levels of insurance applicable and required to be held by its subcontractors? | Y |
| Does the company specify any accreditations/ requirements e.g. UVDB, BuildingConfidence? | Y |
| Has the company identified the minimum quality, safety and environmental controls applicable and required to be held by its supply chain? | Y |
| Is there confirmation of subcontractor competency assurance? | Y |

**Evidence Required**

Supply chain selection procedures
Pre-qualification questionnaires and assessments

**Supplier Response**

Sub-contractors are not used for installation work.
All suppliers are approved and sent a Supplier Questionnaire before a supplier account is established as controlled by the established and certified QMS.
An 'Approved Supplier List' is not maintained, the MRP computer system does not have that facility.
Copies of supplier account screens and completed questionnaires attached. The creation of an Supplier Account in the MRP system is deemed to acceptance of that supplier subject to performance etc

**Documents Provided**

| |
|---|
| 10.1a_QMSSBD_0005 ProcessAnalysisStaffordBridge |
| 10.2b_Supplier Questionnaire Example-Issued PRINT. |
| 10.2a_Supplier Questionnaire Example-Issued PRINT |
| |

**Assessor Evaluation**

A supplier questionnaire was used by the company prior to approval and admission to the approved supplier list. The forms asked for details of their insurances, accreditations and any certification that was relevant to the product being supplied.

## 10.3 Can the company demonstrate that they have put in place formal arrangements for the identification, mitigation and prevention of Counterfeit, Fraudulent and Suspect Items (CFSI)?

3

The Auditor shall establish:

| | |
|---|---|
| Are arrangements integrated into the company's management processes / procedures? | Y |
| Has the company established measures to ensure that its staff are aware of the risks of CFSI and understand and support the company's mitigation methods? | Y |
| Has the company taken measures to raise awareness throughout all levels of its supply chain that there are parties who might wish to substitute CFSI for genuine items or services for commercial gain. | Y |
| Has the company deployed assurance methods to ensure material and component traceability back to source suppliers, including positive material identification, destruction testing methods by third party specialist organisations, including sampling of proprietary high risk items (i.e. bolts and fasteners)? | Y |
| Where examples of CFSI have been identified have appropriate remedial actions have been taken? (i.e. quarantine arrangements, investigation and dispose of CFSI and information shared within the company, licensee organisation, supply chain and wider industry as appropriate to support learning, prevent use and encourage remedial measures? | NA |
| For companies working in the Nuclear Industry, where examples of CFSI have been identified have these been notified to the Office of Nuclear Regulation (ONR)? | NA |

**Evidence Required**

CFSI related procedures.
Records of staff briefings on the CFSI awareness.
Records of assurance methods deployed in relation to CFSI.
Records of the remedial measures taken where CFSI has been detected.
Records of informing the Office of Nuclear Regulation (ONR) where CFSI has been dected (suppliers to Nuclear Sector only).

**Supplier Response**

All timber is purchased as per established and certified QMS procedures.
All material is purchased as per purchasing procedures from recognised reputable suppliers.
All purchased material is traceable from end use to batch/date of receipt and supplier.
Stafford Bridge is FSC certified.
Ref 10.1a_QMSSBD_0005 ProcessAnalysisStafford Bridgev - Purchasing Section.

**Documents Provided**

| |
|---|
| 0.3a_QMSSBD_0008 TimberControl ManfControl SBD |
| 10.3b_FSC Certificate A (Oct 2023) |
| 10.1a_QMSSBD_0005 ProcessAnalysisStaffordBridge |
| |

**Assessor Evaluation**

The PQQ issued to suppliers contained a question on Counterfeit, Fraudulent & Suspicious Items/Materials. The question asked if they had a “procedure in place for the detection and prevention of counterfeit products and parts in the supply chain”. If the answer was no, then they were asked to “explain how you ensure products/materials supplied to Stafford Bridge Doors are not counterfeit”.

Section Score 9

## 11.0 Use of Work Equipment, Vehicles and Machines

**CQ** **11.1** **Does the company have arrangements in place for ensuring that all plant, hand tools and equipment are approved prior to use?** 3

| | |
|---|---|
| Does the company retain any calibration records? | Y |
| Does the company have a process for reporting and repairing defects on plant and equipment? | Y |
| Does the company produce a scheduled maintenance plan for each individual plant item? | Y |
| Are statutory inspections undertaken and valid Test/Inspection Certificates issued by a third party? | Y |

**Evidence Required**

Register / List of applicable plant and equipment
Competency certificates of fitters / maintainers / inspectors
Certificates of Inspection / Calibration
Records of maintenance / servicing / pre start and periodic checks

**Supplier Response**

All PAT is carried out by outside contractors.
In nearly all incidences, all equipment used by the installation team is tested by the Main Contractors at sites, regardless of weather the kit has been inspected recently or not.
Compressed air systems in our works are inspected & tested as required by legislation & insurance.
Handling and lifting equipment is serviced & maintained in accordance with the suppliers/manufactures guidelines and as required by insurance and legislation.
Compressed air equipment is not used for installation work.
Works plant and site plant (when used) do not require any calibration.

**Documents Provided**

| |
|---|
| 11.1a_PAT Records-March 2021 |
| 11.1b_Ins Inspection_CompAir&Liftingplant_20-12-10 |
| 11.1d_ComAip Sched & Report May 2020_Stafford Bridge Doors Limited |
| 11.1c_ComAip Sched & Report May 2020_Stafford Bridge Doors Limited |
| |

**Assessor Evaluation**

The company provided details of PAT testing, compressor examinations and LOLER inspections being conducted for a sample of their equipment.

Section Score 3

## 12.0 Insurance and Warranty

**12.1** **Can the company demonstrate that it has adequate insurance to cover not only its scope of works, also its workforce and surrounding environment?** | 3

| | |
|---|---|
| Name of the insurance company | |
| Policy Numbers | |
| Covers for each claim (Specify category of insurance and currency e.g. US$) | |
| Expiry Date | |
| Does the Cover include scope of operations? Domestic or International coverage / group or localised coverage. | Y |

**Evidence Required**

Certificates of business insurance
Supporting Insurance schedules

**Supplier Response**

Employers, Public, Product and Professional indemnity, Contractors All Risk cover is held. See attached documents

**Documents Provided**

| |
|---|
| 12.1a_Insurance Document-SMGroup-Expiry 31.03.22 |
| |
| |
| |

**Assessor Evaluation**

Witnessed – TWIMC letter issued by MINT covering professional indemnity insurance, employer's liability insurance, contractors all risks insurance, public & products liability insurance – Expires 310/03/2022.

Section Score 3

END .

Key Performance Indicators (KPIs)

| EXPOSURE | 2020 | 2019 | 2018 | 2017 | 2016 |
|---|---|---|---|---|---|
| Total Manhours worked | | | | | |
| | | | | | |
| **SAFETY** | **Current Year** | **Year -1** | **Year -2** | **Year -3** | **Year -4** |
| **Fatalities** | 0 | 0 | 0 | 0 | 0 |
| **HSE Reportable Injuries** | 0 | 1 | 0 | 1 | 0 |
| **Lost time incidents (1-7 days)** | 1 | 3 | 2 | 1 | 1 |
| **Incidents requiring medical** | 1 | 0 | 0 | 0 | 0 |
| **Incident requiring first aid** | 7 | 13 | 4 | 1 | 2 |
| **Dangerous Occurrences** | 0 | 0 | 0 | 0 | 0 |
| **Near Hits/Misses** | 0 | 0 | 0 | 0 | 0 |
| **HSE/HSA or equivalent improvement** | 0 | 0 | 2 | 0 | 0 |
| **HSE/HSA or equivalent prohibition** | 0 | 0 | 1 | 0 | 0 |
| **HSE/HSA or equivalent prosecutions** | 0 | 0 | 0 | 0 | 0 |
| | | | | | |
| **ENVIRONMENT** | **Current Year** | **Year -1** | **Year -2** | **Year -3** | **Year -4** |
| **Minor Non-reportable incidents** | 0 | 0 | 0 | 0 | 0 |
| **Reportable incidents** | 0 | 0 | 0 | 0 | 0 |
| **Enforcement action i.e. Warning** | 0 | 0 | 0 | 0 | 0 |
| | | | | | |