

NQA MANAGEMENT SYSTEMS SURVEILLANCE PROCESS AUDIT REPORT

National Flexible Ltd

VISIT NUMBER:

657864

DATE OF OPENING MEETING:

25/03/2024

THIS REPORT HAS BEEN PREPARED BY:

REGIONAL ASSESSOR:

Steve Barlow

CONTACT NUMBER:

01582 211323

EMAIL:

APPLICABLE STANDARD(S):

ISO 14001:2015





Client Information							
Primary Contact:	Caroline Clay						
	2 Battlefield View		_				
	Birkenshaw						
Address:	Bradford						
	West Yorkshire						
	BD11 2PT						
Contact Tel:	01274 685 566	00015					
	Caroline Mobile: 07	803433	3324				
Contact Email: caroline@nationalflexible.n		<u>net</u>					
Billing Contact: As above							
Billing Tel:	As above						
Billing Email:	As above						
Audit Conducted at: Head Office (multi-site certification)		Participating / Temporary Site (multi-site certification)		Single Site Certification	×		
Audit Conducted as:	Fully On-Site	⊠	Blended (On-Site / Remote)		Fully Remote		
System integration (integrated audits only):			Not currently Integrated at this time				
Additional information on integration (if required):			Client also has 90	Client also has 9001 and BRC			
Certificate expiry date	e(s):		14/03/25				
Required changes to EAC or NQA Codes applied:			No changes required				

	At this location	Across all locations (Multisite)
Total employees	48	
Repetitive or parallel workers	Approx 50% Production	
Energy engaged employees	N/A	
Energy consumption	N/A	
Energy uses	N/A	
Energy sources	N/A	

Energy data only applicable for ISO 50001 audits. Further guidance available in ASR 47:2.1

The date of the next audit is:

Click here to enter a start date. to Click here to enter a finish date.

Version 23 Page 2 of 21



Version 23 Page 3 of 21



Audit Information

Total audit duration (in days):	Duration conducted remotely (in days):
Scope of certification:	Conversion of laminated, polypropylene, polyethylene, amorphous polyethylene terephthalate, polyamide, (polyester), paper, Surlyin, metallised; APET, OPA, EVOH, OPP,CPP, LLDPE, PVdC with barrier coating and anti-fog properties, slit, rewind and hot needle perforation into reels of film for the food, beverage, and associated industries. Scope is appropriate.

Confirmation that audit objectives have been fulfilled: All objectives met.

If no, which objectives have not been met including if remote auditing issues prevented the full completion of audit. Note that customers with installation/service activities within their scope must receive a minimum of one on-site visit once per cycle. Failure to achieve this may result in this activity being removed from the client's scope of certification.

NQA Audit Team		Client	Position	Attendance
Lead Assessor	Steve Barlow	Caroline Clay	QA Manager	Opening and Closing
Member 1		Andrew Burden	Ops Manager	Opening and Closing
Member 2		Mark Thompson	Ops Director	Opening and Closing
		Toni Leach	QA Assistant	Opening and Closing
		Sophie Fleming	QA Assistant	Opening and Closing

^{*} Mandatory attendance at OHSAS18001 / ISO45001 Audits. If these mandatory positions are not present at closing meeting, record and justify reasons in the Executive Summary.

Details of Changes						
Type of action or change required	Action Required	Notes				
Client Name Change:						
Change of Address:						
Scope Change:						
Contact Change:						
Number of Employees Change:						
Major NCs Raised:						
Special Visit Recommended:						
Remote Audit Issue:						

Version 23 Page 4 of 21



Othor	
Other.	

Version 23 Page 5 of 21



Executive Summary

This audit is the annual surveillance audit, Surveillance 2. It follows the first surveillance Audit No. 657862 7th March 2023. No NCR's were raised on the previous visit.

No new minor NCR's have been raised on this audit.

The system has been found to be providing the required level of control.

The organisation's context is well defined, leadership has been effectively demonstrated and commitment levels are fully evident.

This is reflected in the levels of compliance with requirements and operational control evident at the organisation during the audit process.

The availability of documented information to demonstrate that the system is well implemented and well understood throughout the organisation is acceptable.

This audit has involved a review of system administration activities, a review and sample of site activities, as well as review of job related records.

It was fully evident that the key policy commitments are being adhered to.

Grateful thanks are passed to Caroline, Toni, Sophie and the team for their, assistance and hospitality during this audit.

It should be noted that this audit report is based on a sample basis, a fully comprehensive audit has not been undertaken.

	Major NCs	0	Minor NCs	0	OFIs	2	AoCs	0
--	--------------	---	--------------	---	------	---	------	---

Is there any conflict of interest which exists between the Auditor(s) and the client, and are there	
any situations known to them that present themselves, or NQA, with a potential conflict of interest	No.
in respect to the audit undertaken.	

Version 23 Page 6 of 21



Audit Conclusion

- This visit was Satisfactory: Continuation or granting of certification is recommended
- Opportunities for Improvement have been identified
- Any findings are as detailed on the following page(s).

Audit Follow-up Actions

The following post-audit action(s) shall be taken by the client: OFIs to be considered and action taken when appropriate.

Please note that certification will not be granted, reissued or revised until all outstanding Non-Conformance responses have been submitted, and in the case of Major Non-Conformances, the evidence of corrective action has been provided to, and accepted by, NQA.

For further information, useful guidance and further support for responding to audit findings, please visit https://www.nqa.com/en-gb/clients/non-conformities

Management system performance, such as trends in audit findings that require further investigation at the next recertification audit.

Mandatory completion at the Head Office Audit of Surveillance Year 2

A review of the previous Stage 2 report 653452, Surveillance 1 report 657862 7th March 2023 and this report 657864, Surveillance 2, 25th March 2024 where no minor NCR's raised and thus no trends noted. All Management scope elements reviewed over these audits

Version 23 Page 7 of 21



Audit Findings

Ref No.	Clause No.	Details of any finding(s) raised.	Type (Major NC, Minor NC, OFI or AoC)
OFI 01		Legal Requirements & Compliance Obligations Register – issue 4, should be amended to include all the legislation as defined within the Environmental Compliance Obligations Register - rev 2 20/12/23 – reviewed 26/2/24 – 33 pieces of compliance obligations listed	OFI
OFI 02		Client should determine if an oil/water interceptor is part of the drainage system with surface water going to the balancing pond and any regular inspection requirements for this interceptor.	OFI
		End of Findings	

Note: Responses to findings must be sent using the Corrective Action Plan form, as applicable, to caps@nqa.com within the timeframes stated on Page 5.

Version 23 Page 8 of 21



Closure of Findings from Previous Audit: Report No. 657862, Dated 07/03/2023					
Ref No.	Datail of finding and client action:				
	Clause	Summarise Action(s) Taken to Prevent Recurrence	Category		
		No NCR's identified	Choose an item	Choose an item	
			item	item	

Version 23 Page 9 of 21



Opening and Closing Meetings

Opening and closing meetings were performed in accordance with Form 335. The objective of the audit was to confirm that the management system had been established and implemented in accordance with the requirements of the audit standards.

Received comprehensive Induction to site.

Confirmed no changes to system scope.

No significant environmental incidents, enforcements or prosecutions have occurred since the previous audit.

No unusual operations scheduled during this audit.

No changes to company operations since previous audit.

Discussed approach to audit and availability of personnel. Confirmed system scope, discussed and clarified business operations occurring on and off site and within the system scope.

Discussed and justified any inapplicable clauses.

Reviewed certificates.

No changes of significance to management structure since previous audit.

Reviewed previous report. No unusual activities scheduled. No issues arising with adhering to Audit Plan as prepared.

Previous findings – none identified for review

Version 23 Page 10 of 21



Process/audit area:	Organisational Context (External / Internal issues /interested parties / boundaries and scope / process identification) Leadership (Process based approach, risk based thinking, policy, identification of roles and responsibilities)
Auditees:	Mark Thompson, Andy Burden, Caroline Clay, Toni Leach, Sophie Fleming
Auditor (if applicable):	Steve Barlow
Method of Audit	On-site On-site
Evidence to support such	lit canalusian.

Evidence to support audit conclusion:

Changes – Since the previous NQA audit the building extension has been completed for new Warehouse and new yard area.

Business Overview – 2023 lower vols from previous year, Raw material price reduction, customer base remains same, UK sales only, non export, sales increase forecast in tonnage.

Current issues - Plastic Tax on going, Red sea – delivery times on raw material and finished goods – impact on lead times to customers.

Scope – defined in section IMS Cope of manual issue 8/12/23 - no changes from previous report.

Policy – Quality & Environmental Policy, 21/3/24 authorised by the MD – is now an integrated policy, though full requirements of clause 5. 2 addressed.

Environmental Manual – issue 5 21/3/24 – section 1 to 10 – links to all associated procedures SOP's, EP's and IMS procedures.

Context & Interested Parties – section IMS001.1 updated issue 007 4/3/24 to include Climate Change – with each interested party having differing levels of climate change requirement. Currently no changes over and above being implemented through Sustainability requirements, Plastic tax, objectives and targets etc.

Risks & Opportunities – see environmental aspects & impacts section. No changes.

Roles & Responsibilities – Organogram section SOP016.1 issue 23 22/3/24 – some minor changes in reporting lines, though no impact on EMS or scope. Individual responsibilities defined within each relevant procedure.

Conclusion of the overall effectiveness of the process: Process / Audit Area is satisfactory

Process/audit area:	Performance Evaluation and Improvement Processes
Auditees:	Caroline Clay, Toni Leach, Sophie Fleming
Auditor (if applicable):	Steve Barlow
Method of Audit	On-site

Evidence to support audit conclusion:

Internal Audits – Procedure Continual Improvement SOP012 issue 24 20/2/24 and IMS023 Internal Audit Policy issue 13.

Audit Schedule - 2023 – 3 times per year. Covering all process and procedures associated with the EMS. Audit Schedule for 2024.

Completed Internal audits – Waste Management EP12 20/12/23 (no findings), 9001/14001 integration by clause 20/10/23 (no Finding), Feb 2023 section 8 Operation (no findings), 17th July 2023 Doc Control and Records (no findings). 8/1/14 Waste Mgt (no findings)

Internal auditors - Andy Burden, Caroline Clay

Internal Audit Register – 9 reported for 2023 but QMS related. None for EMS.

Version 23 Page 11 of 21



Management Review – Procedure Continual Improvement SOP012 issue 24 20/2/24 – annual process. Minutes dated 20/3/24 – Quality & Env Mgt Review – leadership team and quality/env attendees. Comprehensive review of the performance and effectiveness of the Mgt system

Objectives and Performance Monitoring

IMS002 Quality & Env Objectives - 21/3/24

Objective 1 Work with customer to achieve their sustainability goals -

Technical Trg, Academy Trg Sustainability and packing Audits – numbers defined and completed.

Objective 2 Reduce carbon emissions – reduce mains electric – solar panels fitted to existing bldg. in 2022, with plans for fitment on the extension in 2024.

Continuous Improvement & Target Plan 2024 – details progress on Sustainability Audits, Academy Visits, Trg energy usage etc.

Carbon Neutral Britain – scope 1, 2 and 3 Emissions. Feb 2024 report for 2023 period – Scope 1 = 9.5%, Scope 2 = 5.7% and scope 3 = 84.9% (predominately inbound deliveries). Ecologi - Carbon Credit Certificates – for employee's travel – 1/3/24 668 tonnes.

Nonconformity, Corrective action, Incidents, Compliant and Communication Internal Audit Register – 9 reported for 2023 but QMS related. None for EMS.

No Environmental incidents

No regulatory Incidents reported.

No environmental complaints.

Communication – Yorkshire Water visit 27/10/23 Water Fitting Regs – minor NCR – on cistern – now corrected.

From a review of the above processes, discussions and records for Internal audits, Management Review, objectives/Performance Monitoring and Nonconformance/Corrective & Communication process were seen as effective to defined requirements.

Conclusion of the overall effectiveness of the process: Process / Audit Area is satisfactory

Version 23 Page 12 of 21



Process/audit area:	Planning and Support Processes			
Auditees:	Caroline Clay, Toni Leach, Sophie Fleming			
Auditor (if applicable):	Steve Barlow			
Method of Audit	On-site			

Evidence to support audit conclusion:

Environmental Aspects – Procedure EP4 issue 002 15/12/23 – includes the Env risks requirements. Aspects & Impacts Register 15/12/23

Risks rating for all activities under normal, abnormal and emergency situations – with life cycle evident through waste, procurement, conversation, energy etc.

Highest severity determined as fire – though controls for mitigation evident.

Compliance Obligations and Compliance Evaluation

Procedure EP5 Compliance Obligations – issue 2

Legal Requirements & Compliance Obligations Register – issue 4, 1/3/2024

Environmental Compliance Obligations Register - rev 2 20/12/23 – reviewed 26/2/24 – 33 pieces of compliance obligations listed.

The Organisation has a Register of Legislation and conducts Compliance Review against the Legislation on this Register at intervals with the last one dated 26/2/24 – all compliant. The Organisation has signed up to Cedrec in order to maintain up to date with Legislation changes and new items being released. The Business is also Registered on a Packaging Returns Compliance Scheme. "Indicator" is also another notification system on legislation .Recent changes/updates ti include - Persistent Organic Pollutants (Amend) Regs 2023 EU Deforestation effective Dec 2024) - EUDR)

OFI - Legal Requirements & Compliance Obligations Register – issue 4 , should be amended to include all the legislation as defined within the Environmental Compliance Obligations Register - rev 2 20/12/23 – reviewed 26/2/24 – 33 pieces of compliance obligations listed.

Conclusion of the overall effectiveness of the process: Process / Audit Area is satisfactory

Version 23 Page 13 of 21



Process/audit area:	Site Tour – Operational Controls, monitoring results, inspections, maintenance, waste, F Gas, oil storage, Energy and Packaging
Auditees:	Caroline Clay, Toni Leach, Sophie Fleming
Auditor (if applicable):	Steve Barlow
Method of Audit	On-site

Evidence to support audit conclusion:

Site Tour – A site tour internally and externally was undertaken within National Flexible Ltd operations for the activities within warehouse, manufacturing (slitting, perforation and rewinding) offices, and Yard areas with no uncontrolled releases to air, water or ground with good standards of housekeeping observed.

Waste streams – general waste compactor, cardboard, wood, plastic – all identified and segregated.

Waste records - WTN

C&J Blackburn (cardboard) - WTN 13/2/24

Accrued Plastic (plastic) - WTN's 25/1/24, 8/2/24 etc

Shred IT (confidential paper) - WTN 19/2/24

AWM (general waste) - WTN 5/6/23.

Carriers Licences for - Blackburn Waste Disposal expires 14/2/25, Accrued Plastic expires 2/5/25 etc.

Maintenace & Drainage

Compressed air systems – compressor, receiver, dryer and oil/water separator – serviced/maintained by Northern Compressed Air – 15/5/23.

HVAC systems – 15 systems identified – No R22, R32 and R410 – Refcom and F Gas registered organisation is current. Leak testing evident as part of the annual service Jan 2024. Site Plan and Drainage plan – surface water to balance pond – oil/water interceptor?

No oil storage areas required, nor bunding

LED lighting across the site.

Emergency preparedness – spill kit located in compressor room. Spill kit training discussed.

Packaging Compliance

PRNs and EPR's discussed.

Packaging Compliance Certificate 2022 period – Scheme administered by Beyondly – NPWD108818

Training & Awareness –

Environmental Awareness as part of the induction process e.g Rosie Warnett 8/1/24, Lee Taylor 15/3/24 & C Hirst 15/3/24

Policy document issue log -

Toni Leach - Internal auditor course 15/11/23

Caroline Clay - 14001 lead auditor course 31/7/22

Joshua Machin, Joe Eyles, Steven Mellor - Spill Kit Trg 9/8/22

Sophie Fleming – 14001 int auditor trg 23/1/24.

A review of the site tour and operational Controls associated with the monitoring results, inspections, maintenance, waste, F Gas, oil storage, emergency preparedness and training/competence was determined as effective against the defined requirements.

OFI – Client should determine if an oil/water interceptor is part of the drainage system with surface water going to the balancing pond and any regular inspection requirements for this interceptor.

Conclusion of the overall effectiveness of the process: Process / Audit Area is satisfactory

Version 23 Page 14 of 21



Use of Registration Marks and Logos	
Use of Registration Mark (if used) is in accordance with the Rules of Registration	Yes
Detail if required	

Example of the current NQA logos:

ISO 9001 (UKAS Accredited)



ISO 9001 (UKAS Accredited) with 'UKAS Tick and Crown'



More information can be found at: https://www.nqa.com/en-gb/clients/logo-library

If there are inaccuracies, errors or queries regarding this report or audit findings, please contact NQA Head Office on 0800 052 2424 within five working days of the closing meeting.

End of Audit

Version 23 Page 15 of 21



AUDIT REPORT PART C - AUDIT PLAN

Client Name: National Flexible Ltd

Location address or post code: BD11 2PT

This plan relates to the forthcoming: Recertification visit

Applicable standard(s) or supporting criteria: ISO14001:2015

Site Scope: Conversion of laminated, polypropylene, polyethylene, amorphous polyethylene terephthalate, polyamide, (polyester), paper, Surlyin, metallised; APET, OPA, EVOH, OPP,CPP, LLDPE, PVdC with barrier coating and anti-fog properties, slit, rewind and hot needle perforation into reels of film for the food, beverage, and associated industries.

Date	Date – Day 1	Date – Day 2			
Role	Lead Auditor		Team Member	Method	
Time	Location / Department / Function	Choose	Location / Department / Function	Choose	Indicative Records / People Required
		an item.		an item.	
09.00	Opening Meeting – including	0900	Site Tour – Including Waste,		
	review of any issues raised at		COSHH, Emergency Preparedness,		
	previous visit		RA, Inspections etc.		
09:30	Organisational Context (External /	10:30	Waste Management, Maintenace &		
	Internal issues /interested parties /		Packaging		
	boundaries and scope / process				
	identification)				
10.00	Leadership (Process based	11:30	Energy Management &		
	approach, risk based thinking,		Sustainability		
	policy, identification of roles and				
	responsibilities)				
10:30	Planning Processes - Manual,				
	Policy, Procedures etc.				
11.00	Improvement / Performance				
	Evaluation Processes: internal				
	Audits, Management Review,				
	Objectives and NCR's etc.				

Version 23 Page 16 of 21

nga

AUDIT REPORT PART C - AUDIT PLAN

11:30	Compliance / Compliance				
	Evaluation – Aspects/Impacts,				
	Legislation and Compliance,				
12:30	Lunch	Choose	Lunch	Choose	
		an item.		an item.	
13:00	Design, Procurement, Supplier &	13:00	Training, Competence &		
	Contractors		Communications		
		1400	Audit Trail Follow ups		
15:00	Report Write up	1500	Report Write up		
16.00					
16:30	Review Meeting	1600	Closing Meeting		
17:00	End of Audit	1630	End of Audit		

The objectives of the audit will be:

- To confirm that the management system had been established implemented and maintained in accordance with the requirements of the audit standard.
- To evaluate the ability of the management system to ensure the client organisation meets applicable statutory, regulatory and contractual requirements. Note: A management system certification audit is not a legal compliance audit.
- To evaluate the effectiveness of the management system to ensure it is continually meeting its specified objectives
- To identify as applicable, areas of the management system for potential improvement.

The audit scope describes the extent and boundaries of the audit, such as physical locations, organisational units, activities and processes to be audited.

Where the initial or re-certification process consists of more than one audit (e.g. covering different locations), the scope of an individual audit may not cover the full certification scope, but the totality of audits shall be consistent with the scope in the certification document.

Rescheduling

In the event that rescheduling cannot be avoided, or unforeseen circumstances arise, please contact NQA as soon as possible. Please note that cancellation fees may apply. Rescheduling may also result in the suspension or expiry of certification if audits are not undertaken within prescribed timeframes. Information related to rescheduling is detailed on your audit confirmation and in the NQA Rules Related to Registration available on the NQA website.

Remote Audits

Where elements of the audit are to be conducted remotely this is detailed on the audit plan. NQA will plan to deliver the audit using the tools outlined below. If you anticipate issues facilitating an audit using the listed tools, please contact your auditor at your soonest convenience.

- Video conferencing via Microsoft Teams (hosted by NQA)
- Document transmittal via email or screen share using Microsoft Teams

Version 23 Page 17 of 21



AUDIT REPORT PART C - AUDIT PLAN

- Video calls using either Microsoft Teams or equivalent technology (such as Zoom, WhatsApp, FaceTime)
- Alternative platforms can be supported subject to prior arrangement with the NQA Lead Auditor and technology compatibility

Version 23 Page 18 of 21



AUDIT REPORT PART D - AUDIT MATRIX

Relevant Standard/Supporting Documentation:

ISO14001:2015

- This audit programme is to be prepared by the Lead Auditor at the completion of the Stage 2 audit or the Recertification audit. It should be replicated in all subsequent surveillance visit reports.
- Where an element(s) of the programme cannot be completed at a given visit the programme shall be amended and up-issued accordingly to ensure coverage at the following visit.
- Site visits are to be included in the programme with a clear indication as to the processes intended to be sampled.

Type of visit	Stage 1	Stage 2	Surveillance 1	Surveillance 2	Recertification		
Visit Due Date (MM/YY)	_		0.5 Day 07/03/23	Mar 2024 25/3/24	Mar 2025 2 days		
Mandatory Elements / Selected Processes	Processes to be audited during visits are to be indicated with a cross (X).						
Midiludiory Elements / Selected Frocesses	All processes are to be audited during a three-year certification cycle excluding the re- certification visit.						
Context of the organization			Complete, remote	Complete, on-site	Planned, on-site		
Management Issues: (Manual, Context, Scope, Strategic Direction, Leadership, Risks and Opportunities, Policy, Procedures, Management Review, Objectives and Targets, Internal Audits, Non-Conformances, Corrective Action, Incidents)			Complete, remote	Complete, on-site	Planned, on-site		
Leadership			Complete, remote	Complete, on-site	Planned, on-site		
Planning			Complete, remote	Complete, on-site	Planned, on-site		
Support			Complete, remote	Complete, on-site	Planned, on-site		
Performance evaluation			Complete, remote	Complete, on-site	Planned, on-site		
Improvement			Complete, remote	Complete, on-site	Planned, on-site		
Use of marks and references to certification / Client website			Complete, remote	Complete, on-site	Planned, on-site		
Site Tour: Site Walk – Including Waste, COSHH, Emergency Preparedness, RA, Inspections etc.			Complete, remote	Complete, on-site	Planned, on-site		
Operations Processes (specify from scope)							
Aspects and Impacts			Complete, remote	Complete, on-site	Planned, on-site		
Legislation and Compliance			Complete, remote	Complete, on-site	Planned, on-site		
Training, Competency, Awareness and Communication			Complete, remote	Complete, on-site	Planned, on-site		
Audit trails will be developed based upon identified risk throughout the audit and as such timings and content may be subject to change.							

Addit trails will be developed based upon identified risk throughout the addit and as such timings and content may be subject to change.

Where the client operates shifts, the activities that take place during shift working shall be considered when developing the addit programming.

Version 23 Page 19 of 21



AUDIT REPORT PART D - AUDIT MATRIX

Version 23 Page 20 of 21

ONGOING SUPPORT SERVICES



Training promotions and complimentary e-learning

As an NQA client, enjoy discounted training courses and complimentary access to our portfolio of e-learning courses.





APPROVED TRAINING PARTNER



Support through free webinars

Join one of our many free webinars discussing standards, improvement and industry topics. Use our webinars to help you improve your knowledge and understanding and engage with our subject matter experts.



PR and marketing support

Help to promote your press releases, blogs and case studies along with complimentary vehicle stickers for vans and HGV's. Use the NQA Certified logo to promote your certification.



InTouch and legal updates

Registration to a monthly e-zine from NQA. Translating the language of standards, management systems and certification through articles covering best practices, tools and techniques and alerts on latest environmental and health & safety legislation.



Trusted partners

Our Associate Partner Programme is designed to put you in touch with third party independent consultants and software providers that can support you through every step of your certification journey.





NQA certified clients are authorized and encouraged to use NQA logos to promote their certification achievements.

Access all NQA logos here:

https://www.nqa.com/en-gb/clients/logo-library

